

**STATE PLAN FOR THE
NORTH CAROLINA STATE VOCATIONAL REHABILITATION SERVICES
PROGRAM
AND
STATE PLAN SUPPLEMENT FOR THE NORTH CAROLINA STATE SUPPORTED
EMPLOYMENT SERVICES PROGRAM**



**Updated for Federal Fiscal Year 2015
Effective 10/1/2014 – 9/30/2015**

State Plan for the State Vocational Rehabilitation Services Program and
State Plan Supplement for the State Supported Employment Services Program
NC Department of Health and Human Services - Division of Vocational Rehabilitation
State Plan for Fiscal Year 2015 (submitted FY 2014)

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Preprint Material

Preprint - Section 1: State Certifications

- 1.1 The **North Carolina Department of Health and Human Services** is authorized to submit this State Plan under Title I of the Rehabilitation Act of 1973, as amended¹ and its supplement under Title VI, Part B, of the Rehabilitation Act².
- 1.2 As a condition for the receipt of federal funds under Title I, Part B, of the Rehabilitation Act for the provision of vocational rehabilitation services, the **North Carolina Department of Health and Human Services**³ agrees to operate and administer the State Vocational Rehabilitation Services Program in accordance with the provisions of this State Plan⁴, the Rehabilitation Act, and all applicable regulations⁵, policies and procedures established by the secretary. Funds made available under Section 111 of the Rehabilitation Act are used solely for the provision of vocational rehabilitation services under Title I of the Rehabilitation Act and the administration of the State Plan for the vocational rehabilitation services program.
- 1.3 As a condition for the receipt of federal funds under Title VI, Part B, of the Rehabilitation Act for supported employment services, the designated state agency agrees to operate and administer the State Supported Employment Services Program in accordance with the provisions of the supplement to this State Plan⁶, the Rehabilitation Act and all applicable regulations⁷, policies and procedures established by the secretary. Funds made available under Title VI, Part B, are used solely for the provision of supported employment services and the administration of the supplement to the Title I State Plan.
- 1.4 The designated state agency and/or the designated state unit has the authority under state law to perform the functions of the state regarding this State Plan and its supplement. Yes.
- 1.5 The state legally may carry out each provision of the State Plan and its supplement. Yes.
- 1.6 All provisions of the State Plan and its supplement are consistent with state law. Yes.
- 1.7 The **Director, Division of Vocational Rehabilitation Services** has the authority under state law to receive, hold and disburse federal funds made available under this State Plan and its supplement. Yes.
- 1.8 The **Secretary Department of Health and Human Services** has the authority to submit this State Plan for vocational rehabilitation services and the State Plan supplement for supported employment services. Yes.
- 1.9 The agency that submits this State Plan and its supplement has adopted or otherwise formally approved the plan and its supplement. Yes.

¹ Public Law 93 112, as amended by Public Laws 93-516, 95-602, 98-221, 99-506, 100-630, 102-569, 103-073, and 105-220.

² Unless otherwise stated, "Rehabilitation Act" means the Rehabilitation Act of 1973, as amended.

³ All references in this plan to "designated state agency" or to "the state agency" relate to the agency identified in this paragraph.

⁴ No funds under Title I of the Rehabilitation Act may be awarded without an approved State Plan in accordance with Section 101(a) of the Rehabilitation Act and 34 CFR Part 361.


⁵ Applicable regulations include the Education Department General Administrative Regulations (EDGAR) in 34 CFR Parts 74, 76, 77, 79, 80, 81, 82, 85 and 86 and the State Vocational Rehabilitation Services Program regulations in 34 CFR Part 361.

⁶ No funds under Title VI, Part B, of the Rehabilitation Act may be awarded without an approved supplement to the Title I State Plan in accordance with Section 625(a) of the Rehabilitation Act.

⁷ Applicable regulations include the EDGAR citations in footnote 5, 34 CFR Part 361, and 34 CFR Part 363.

State Plan Certified By

As the authorized signatory identified above, I hereby certify that I will sign, date and retain in the files of the designated state agency/designated state unit Section 1 of the Preprint, and separate Certification of Lobbying forms (Form ED-80-0013; available at <http://www.ed.gov/fund/grant/apply/appforms/ed80-013.pdf>) for both the vocational rehabilitation and supported employment programs.


Signed:
Name of Signatory: 
Title of Signatory: Secretary
Date Signed: 6-24-14

Assurances Certified By

At the request of RSA, the designated state agency and/or the designated state unit provide the following assurance(s), in addition to those contained within Section 2 through 8 below, in connection with the approval of the State Plan for FY 2015. Yes.

Comments:

- Certification Regarding Lobbying (ED 80-0013) for the NC DVRS Vocational Rehabilitation Program
- Certification Regarding Lobbying (ED 80-0013) for the NC DVRS Supported Employment Program

Signed:
Name of Signatory: 
Title of Signatory: Secretary
Date Signed: 6-24-14

* The signatory of the assurance with the authority to execute and submit the State Plan will maintain a signed copy of the assurance(s) with the signed State Plan.

Preprint - Section 2: Public Comment on State Plan Policies and Procedures

2.1 Public participation requirements.

(Section 101(a)(16)(A) of the Rehabilitation Act; 34 CFR 361.10(d), .20(a), (b), (d); and 363.11(g)(9))

(a) Conduct of public meetings.

The designated state agency, prior to the adoption of any substantive policies or procedures governing the provision of vocational rehabilitation services under the State Plan and supported employment services under the supplement to the State Plan, including making any substantive amendments to the policies and procedures, conducts public meetings throughout the state to provide the public, including individuals with disabilities, an opportunity to comment on the policies or procedures.

(b) Notice requirements.

The designated state agency, prior to conducting the public meetings, provides appropriate and sufficient notice throughout the state of the meetings in accordance with state law governing public meetings or, in the absence of state law governing public meetings, procedures developed by the state agency in consultation with the State Rehabilitation Council, if the agency has a council.

(c) Special consultation requirements.

The state agency actively consults with the director of the Client Assistance Program, the State Rehabilitation Council, if the agency has a council and, as appropriate, Indian tribes, tribal organizations and native Hawaiian organizations on its policies and procedures governing the provision of vocational rehabilitation services under the State Plan and supported employment services under the supplement to the State Plan.

Preprint - Section 3: Submission of the State Plan and its Supplement

3.1 Submission and revisions of the State Plan and its supplement.

(Sections 101(a)(1), (23) and 625(a)(1) of the Rehabilitation Act; Section 501 of the Workforce Investment Act; 34 CFR 76.140; 361.10(e), (f), and (g); and 363.10)

- (a) The state submits to the commissioner of the Rehabilitation Services Administration the State Plan and its supplement on the same date that the state submits either a State Plan under Section 112 of the Workforce Investment Act of 1998 or a state unified plan under Section 501 of that Rehabilitation Act.
- (b) The state submits only those policies, procedures or descriptions required under this State Plan and its supplement that have not been previously submitted to and approved by the commissioner.
- (c) The state submits to the commissioner, at such time and in such manner as the commissioner determines to be appropriate, reports containing annual updates of the information relating to the:
 - 1. comprehensive system of personnel development;
 - 2. assessments, estimates, goals and priorities, and reports of progress;
 - 3. innovation and expansion activities; and
 - 4. other updates of information required under Title I, Part B, or Title VI, Part B, of the Rehabilitation Act that are requested by the commissioner.
- (d) The State Plan and its supplement are in effect subject to the submission of modifications the state determines to be necessary or the commissioner requires based on a change in state policy, a change in federal law, including regulations, an interpretation of the Rehabilitation Act by a federal court or the highest court of the state, or a finding by the commissioner of state noncompliance with the requirements of the Rehabilitation Act, 34 CFR 361 or 34 CFR 363.

3.2 Supported Employment State Plan supplement.

(Sections 101(a)(22) and 625(a) of the Rehabilitation Act; 34 CFR 361.34 and 363.10)

- (a) The state has an acceptable plan for carrying out Part B, of Title VI of the Rehabilitation Act that provides for the use of funds under that part to supplement funds made available under Part B, of Title I of the Rehabilitation Act for the cost of services leading to supported employment.
- (b) The Supported Employment State Plan, including any needed annual revisions, is submitted as a supplement to the State Plan.

Preprint - Section 4: Administration of the State Plan

4.1 Designated state agency and designated state unit.

(Section 101(a)(2) of the Rehabilitation Act; 34 CFR 361.13(a) and (b))

(a) Designated state agency.

1. There is a state agency designated as the sole state agency to administer the State Plan or to supervise its administration in a political subdivision of the state by a sole local agency.
2. The designated state agency is a state agency that is not primarily concerned with vocational rehabilitation or vocational and other rehabilitation of individuals with disabilities and includes a vocational rehabilitation unit as provided in paragraph (b) of this section. (Option A was not selected/Option B was selected)

(b) Designated state unit.

1. If the designated state agency is not primarily concerned with vocational rehabilitation or vocational and other rehabilitation of individuals with disabilities, in accordance with subparagraph 4.1(a)(2)(B) of this section, the state agency includes a vocational rehabilitation bureau, division or unit that:
 - A. is primarily concerned with vocational rehabilitation or vocational and other rehabilitation of individuals with disabilities and is responsible for the administration of the designated state agency's vocational rehabilitation program under the State Plan;
 - B. has a full-time director;
 - C. has a staff, at least 90 percent of whom are employed full-time on the rehabilitation work of the organizational unit; and
 - D. is located at an organizational level and has an organizational status within the designated state agency comparable to that of other major organizational units of the designated state agency.
2. The name of the designated state vocational rehabilitation unit is:
North Carolina Division of Vocational Rehabilitation Services

4.2 State independent commission or State Rehabilitation Council.

(Sections 101(a)(21) and 105 of the Rehabilitation Act; 34 CFR 361.16 and .17)

The State Plan must contain one of the following assurances.

- (a) The designated state agency is an independent state commission. (Option A was not selected/Option B was selected)
- (b) The state has established a State Rehabilitation Council that meets the criteria set forth in Section 105 of the Rehabilitation Act, 34 CFR 361.17 and the designated state unit:
 1. jointly with the State Rehabilitation Council develops, agrees to and reviews annually state goals and priorities and jointly submits to the commissioner annual reports of progress in accordance with the provisions of Section 101(a)(15) of the Rehabilitation Act, 34 CFR 361.29 and subsection 4.11 of this State Plan;
 2. regularly consults with the State Rehabilitation Council regarding the development, implementation and revision of state policies and procedures of general applicability pertaining to the provision of vocational rehabilitation services;
 3. includes in the State Plan and in any revision to the State Plan a summary of input provided by the State Rehabilitation Council, including recommendations from the annual report of the council described in Section 105(c)(5) of the Rehabilitation Act and 34 CFR 361.17(h)(5), the

review and analysis of consumer satisfaction described in Section 105(c)(4) of the Rehabilitation Act and 34 CFR 361.17(h)(4), and other reports prepared by the council and the response of the designated state unit to the input and recommendations, including explanations for rejecting any input or recommendation; and

4. transmits to the council:

- A. all plans, reports and other information required under 34 CFR 361 to be submitted to the commissioner;
- B. all policies and information on all practices and procedures of general applicability provided to or used by rehabilitation personnel in carrying out this State Plan and its supplement; and
- C. copies of due process hearing decisions issued under 34 CFR 361.57, which are transmitted in such a manner as to ensure that the identity of the participants in the hearings is kept confidential.

- (c) If the designated state unit has a State Rehabilitation Council, Attachment 4.2(c) provides a summary of the input provided by the council consistent with the provisions identified in subparagraph (b)(3) of this section; the response of the designated state unit to the input and recommendations; and, explanations for the rejection of any input or any recommendation.

4.3 Consultations regarding the administration of the State Plan.

(Section 101(a)(16)(B) of the Rehabilitation Act; 34 CFR 361.21)

The designated state agency takes into account, in connection with matters of general policy arising in the administration of the plan and its supplement, the views of:

- (a) individuals and groups of individuals who are recipients of vocational rehabilitation services or, as appropriate, the individuals' representatives;
- (b) personnel working in programs that provide vocational rehabilitation services to individuals with disabilities;
- (c) providers of vocational rehabilitation services to individuals with disabilities;
- (d) the director of the Client Assistance Program; and
- (e) the State Rehabilitation Council, if the state has a council.

4.4 Nonfederal share.

(Sections 7(14) and 101(a)(3) of the Rehabilitation Act; 34 CFR 80.24 and 361.60)

The nonfederal share of the cost of carrying out this State Plan is 21.3 percent and is provided through the financial participation by the state or, if the state elects, by the state and local agencies.

4.5 Local administration.

(Sections 7(24) and 101(a)(2)(A) of the Rehabilitation Act; 34 CFR 361.5(b)(47) and .15)

The State Plan provides for the administration of the plan by a local agency. No

If "Yes", the designated state agency:

- (a) ensures that each local agency is under the supervision of the designated state unit with the sole local agency, as that term is defined in Section 7(24) of the Rehabilitation Act and 34 CFR 361.5(b)(47), responsible for the administration of the vocational rehabilitation program within the political subdivision that it serves; and
- (b) develops methods that each local agency will use to administer the vocational rehabilitation program in accordance with the State Plan.

4.6 Shared funding and administration of joint programs.

(Section 101(a)(2)(A)(ii) of the Rehabilitation Act; 34 CFR 361.27)

The State Plan provides for the state agency to share funding and administrative responsibility with another state agency or local public agency to carry out a joint program to provide services to individuals with disabilities. No

If "Yes", the designated state agency submits to the commissioner for approval a plan that describes its shared funding and administrative arrangement. The plan must include:

- (a) a description of the nature and scope of the joint program;
- (b) the services to be provided under the joint program;
- (c) the respective roles of each participating agency in the administration and provision of services; and
- (d) the share of the costs to be assumed by each agency.

4.7 Statewideness and waivers of statewideness.

(Section 101(a)(4) of the Rehabilitation Act; 34 CFR 361.25, .26, and .60(b)(3)(i) and (ii))

X This agency is not requesting a waiver of statewideness.

- (a) Services provided under the State Plan are available in all political subdivisions of the state.
- (b) The state unit may provide services in one or more political subdivisions of the state that increase services or expand the scope of services that are available statewide under this State Plan if the:
 - 1. nonfederal share of the cost of these services is met from funds provided by a local public agency, including funds contributed to a local public agency by a private agency, organization or individual;
 - 2. services are likely to promote the vocational rehabilitation of substantially larger numbers of individuals with disabilities or of individuals with disabilities with particular types of impairments; and
 - 3. state, for purposes other than the establishment of a community rehabilitation program or the construction of a particular facility for community rehabilitation program purposes, requests in Attachment 4.7(b)(3) a waiver of the statewideness requirement in accordance with the following requirements:
 - A. identification of the types of services to be provided;
 - B. written assurance from the local public agency that it will make available to the state unit the nonfederal share of funds;
 - C. written assurance that state unit approval will be obtained for each proposed service before it is put into effect; and
 - D. written assurance that all other State Plan requirements, including a state's order of selection, will apply to all services approved under the waiver.
- (c) Contributions, consistent with the requirements of 34 CFR 361.60(b)(3)(ii), by private entities of earmarked funds for particular geographic areas within the state may be used as part of the nonfederal share without the state requesting a waiver of the statewideness requirement provided that the state notifies the commissioner that it cannot provide the full nonfederal share without using the earmarked funds.

4.8 Cooperation, collaboration and coordination.

(Sections 101(a)(11), (24)(B), and 625(b)(4) and (5) of the Rehabilitation Act; 34 CFR 361.22, .23, .24, and .31, and 363.11(e))

- (a) Cooperative agreements with other components of statewide work force investment system. The designated state agency or the designated state unit has cooperative agreements with other

entities that are components of the statewide work force investment system and replicates those agreements at the local level between individual offices of the designated state unit and local entities carrying out the One-Stop service delivery system or other activities through the statewide work force investment system.

(b) Cooperation and coordination with other agencies and entities. Attachment 4.8(b) (1)-(4) describes the designated state agency's:

1. cooperation with and use of the services and facilities of the federal, state, and local agencies and programs, including programs carried out by the undersecretary for Rural Development of the United States Department of Agriculture and state use contracting programs, to the extent that those agencies and programs are not carrying out activities through the statewide work force investment system;
2. coordination, in accordance with the requirements of paragraph 4.8(c) of this section, with education officials to facilitate the transition of students with disabilities from school to the receipt of vocational rehabilitation services;
3. establishment of cooperative agreements with private nonprofit vocational rehabilitation service providers, in accordance with the requirements of paragraph 5.10(b) of the State Plan; and,
4. efforts to identify and make arrangements, including entering into cooperative agreements, with other state agencies and entities with respect to the provision of supported employment and extended services for individuals with the most significant disabilities, in accordance with the requirements of subsection 6.5 of the supplement to this State Plan.

(c) Coordination with education officials.

1. Attachment 4.8(b)(2) describes the plans, policies and procedures for coordination between the designated state agency and education officials responsible for the public education of students with disabilities that are designed to facilitate the transition of the students who are individuals with disabilities from the receipt of educational services in school to the receipt of vocational rehabilitation services under the responsibility of the designated state agency.
2. The State Plan description must:
 - A. provide for the development and approval of an individualized plan for employment in accordance with 34 CFR 361.45 as early as possible during the transition planning process but, at the latest, before each student determined to be eligible for vocational rehabilitation services leaves the school setting or if the designated state unit is operating on an order of selection before each eligible student able to be served under the order leaves the school setting; and
 - B. include information on a formal interagency agreement with the state educational agency that, at a minimum, provides for:
 - i. consultation and technical assistance to assist educational agencies in planning for the transition of students with disabilities from school to post school activities, including vocational rehabilitation services;
 - ii. transition planning by personnel of the designated state agency and the educational agency for students with disabilities that facilitates the development and completion of their individualized education programs under Section 614(d) of the Individuals with Disabilities Education Act;
 - iii. roles and responsibilities, including financial responsibilities, of each agency, including provisions for determining state lead agencies and qualified personnel responsible for transition services; and

- iv. procedures for outreach to students with disabilities as early as possible during the transition planning process and identification of students with disabilities who need transition services.
- (d) Coordination with statewide independent living council and independent living centers. The designated state unit, the Statewide Independent Living Council established under Section 705 of the Rehabilitation Act and 34 CFR 364, and the independent living centers described in Part C of Title VII of the Rehabilitation Act and 34 CFR 366 have developed working relationships and coordinate their activities.
- (e) Cooperative agreement with recipients of grants for services to American Indians.
 - 1. There is in the state a recipient(s) of a grant under Part C of Title I of the Rehabilitation Act for the provision of vocational rehabilitation services for American Indians who are individuals with disabilities residing on or near federal and state reservations. Yes.
 - 2. If "Yes", the designated state agency has entered into a formal cooperative agreement that meets the following requirements with each grant recipient in the state that receives funds under Part C of Title I of the Rehabilitation Act:
 - A. strategies for interagency referral and information sharing that will assist in eligibility determinations and the development of individualized plans for employment;
 - B. procedures for ensuring that American Indians who are individuals with disabilities and are living near a reservation or tribal service area are provided vocational rehabilitation services; and provisions for sharing resources in cooperative studies and assessments, joint training activities, and other collaborative activities designed to improve the provision of services to American Indians who are individuals with disabilities.

4.9 Methods of administration.

(Section 101(a)(6) of the Rehabilitation Act; 34 CFR 361.12, .19 and .51(a) and (b))

(a) In general.

The state agency employs methods of administration, including procedures to ensure accurate data collection and financial accountability, found by the commissioner to be necessary for the proper and efficient administration of the plan and for carrying out all the functions for which the state is responsible under the plan and 34 CFR 361.

(b) Employment of individuals with disabilities.

The designated state agency and entities carrying out community rehabilitation programs in the state, who are in receipt of assistance under Part B, of Title I of the Rehabilitation Act and this State Plan, take affirmative action to employ and advance in employment qualified individuals with disabilities covered under and on the same terms and conditions as set forth in Section 503 of the Rehabilitation Act.

(c) Facilities.

Any facility used in connection with the delivery of services assisted under this State Plan meets program accessibility requirements consistent with the provisions, as applicable, of the Architectural Barriers Rehabilitation Act of 1968, Section 504 of the Rehabilitation Act, the Americans with Disabilities Act of 1990 and the regulations implementing these laws.

4.10 Comprehensive system of personnel development.

(Section 101(a)(7) of the Rehabilitation Act; 34 CFR 361.18)

Attachment 4.10 describes the designated state agency's procedures and activities to establish and maintain a comprehensive system of personnel development designed to ensure an adequate supply of qualified state rehabilitation professional and paraprofessional personnel for the designated state unit. The description includes the following:

(a) Data system on personnel and personnel development.

Development and maintenance of a system for collecting and analyzing on an annual basis data on qualified personnel needs and personnel development with respect to:

1. Qualified personnel needs.
 - A. The number of personnel who are employed by the state agency in the provision of vocational rehabilitation services in relation to the number of individuals served, broken down by personnel category;
 - B. The number of personnel currently needed by the state agency to provide vocational rehabilitation services, broken down by personnel category; and
 - C. Projections of the number of personnel, broken down by personnel category, who will be needed by the state agency to provide vocational rehabilitation services in the state in five years based on projections of the number of individuals to be served, including individuals with significant disabilities, the number of personnel expected to retire or leave the field, and other relevant factors.
2. Personnel development.
 - A. A list of the institutions of higher education in the state that are preparing vocational rehabilitation professionals, by type of program;
 - B. The number of students enrolled at each of those institutions, broken down by type of program; and
 - C. The number of students who graduated during the prior year from each of those institutions with certification or licensure, or with the credentials for certification or licensure, broken down by the personnel category for which they have received, or have the credentials to receive, certification or licensure.

(b) Plan for recruitment, preparation and retention of qualified personnel.

Development, updating on an annual basis, and implementation of a plan to address the current and projected needs for qualified personnel based on the data collection and analysis system described in paragraph (a) of this subsection and that provides for the coordination and facilitation of efforts between the designated state unit and institutions of higher education and professional associations to recruit, prepare and retain personnel who are qualified in accordance with paragraph (c) of this subsection, including personnel from minority backgrounds and personnel who are individuals with disabilities.

(c) Personnel standards.

Policies and procedures for the establishment and maintenance of personnel standards to ensure that designated state unit professional and paraprofessional personnel are appropriately and adequately prepared and trained, including:

1. standards that are consistent with any national- or state-approved or recognized certification, licensing, registration, or, in the absence of these requirements, other comparable requirements (including state personnel requirements) that apply to the profession or discipline in which such personnel are providing vocational rehabilitation services.
2. To the extent that existing standards are not based on the highest requirements in the state applicable to a particular profession or discipline, the steps the state is currently taking and the steps the state plans to take in accordance with the written plan to retrain or hire personnel within the designated state unit to meet standards that are based on the highest requirements in the state, including measures to notify designated state unit personnel, the institutions of higher education identified in subparagraph (a)(2), and other public agencies of these steps and the time lines for taking each step.
3. The written plan required by subparagraph (c)(2) describes the following:

- A. specific strategies for retraining, recruiting and hiring personnel;
- B. the specific time period by which all state unit personnel will meet the standards required by subparagraph (c)(1);
- C. procedures for evaluating the designated state unit's progress in hiring or retraining personnel to meet applicable personnel standards within the established time period; and
- D. the identification of initial minimum qualifications that the designated state unit will require of newly hired personnel when the state unit is unable to hire new personnel who meet the established personnel standards and the identification of a plan for training such individuals to meet the applicable standards within the time period established for all state unit personnel to meet the established personnel standards.

(d) Staff development.

Policies, procedures and activities to ensure that all personnel employed by the designated state unit receive appropriate and adequate training. The narrative describes the following:

- 1. A system of staff development for professionals and paraprofessionals within the designated state unit, particularly with respect to assessment, vocational counseling, job placement and rehabilitation technology.
- 2. Procedures for the acquisition and dissemination to designated state unit professionals and paraprofessional's significant knowledge from research and other sources.

(e) Personnel to address individual communication needs.

Availability of personnel within the designated state unit or obtaining the services of other individuals who are able to communicate in the native language of applicants or eligible individuals who have limited English speaking ability or in appropriate modes of communication with applicants or eligible individuals.

(f) Coordination of personnel development under the Individuals with Disabilities Education Act.

Procedures and activities to coordinate the designated state unit's comprehensive system of personnel development with personnel development under the Individuals with Disabilities Education Act.

4.11. Statewide assessment; annual estimates; annual state goals and priorities; strategies; and progress reports.

(Sections 101(a)(15), 105(c)(2) and 625(b)(2) of the Rehabilitation Act; 34 CFR 361.17(h)(2), .29, and 363.11(b))

(a) Comprehensive statewide assessment.

- 1. Attachment 4.11(a) documents the results of a comprehensive, statewide assessment, jointly conducted every three years by the designated state unit and the State Rehabilitation Council (if the state has such a council). The assessment describes:
 - A. the rehabilitation needs of individuals with disabilities residing within the state, particularly the vocational rehabilitation services needs of:
 - i. individuals with the most significant disabilities, including their need for supported employment services;
 - ii. individuals with disabilities who are minorities and individuals with disabilities who have been unserved or underserved by the vocational rehabilitation program carried out under this State Plan; and
 - iii. individuals with disabilities served through other components of the statewide work force investment system.

- B. The need to establish, develop or improve community rehabilitation programs within the state.
 2. For any year in which the state updates the assessments, the designated state unit submits to the commissioner a report containing information regarding updates to the assessments.
- (b) Annual estimates.
- Attachment 4.11(b) identifies on an annual basis state estimates of the:
1. number of individuals in the state who are eligible for services under the plan;
 2. number of eligible individuals who will receive services provided with funds provided under Part B of Title I of the Rehabilitation Act and under Part B of Title VI of the Rehabilitation Act, including, if the designated state agency uses an order of selection in accordance with subparagraph 5.3(b)(2) of this State Plan, estimates of the number of individuals to be served under each priority category within the order; and
 3. costs of the services described in subparagraph (b)(1), including, if the designated state agency uses an order of selection, the service costs for each priority category within the order.
- (c) Goals and priorities.
1. Attachment 4.11(c)(1) identifies the goals and priorities of the state that are jointly developed or revised, as applicable, with and agreed to by the State Rehabilitation Council, if the agency has a council, in carrying out the vocational rehabilitation and supported employment programs.
 2. The designated state agency submits to the commissioner a report containing information regarding any revisions in the goals and priorities for any year the state revises the goals and priorities.
 3. Order of selection.
If the state agency implements an order of selection, consistent with subparagraph 5.3(b)(2) of the State Plan, Attachment 4.11(c)(3):
 - A. shows the order to be followed in selecting eligible individuals to be provided vocational rehabilitation services;
 - B. provides a justification for the order; and
 - C. identifies the service and outcome goals, and the time within which these goals may be achieved for individuals in each priority category within the order.
 4. Goals and plans for distribution of Title VI, Part B, funds.
Attachment 4.11(c)(4) specifies, consistent with subsection 6.4 of the State Plan supplement, the state's goals and priorities with respect to the distribution of funds received under Section 622 of the Rehabilitation Act for the provision of supported employment services.
- (d) Strategies.
1. Attachment 4.11(d) describes the strategies, including:
 - A. the methods to be used to expand and improve services to individuals with disabilities, including how a broad range of assistive technology services and assistive technology devices will be provided to those individuals at each stage of the rehabilitation process and how those services and devices will be provided to individuals with disabilities on a statewide basis;
 - B. outreach procedures to identify and serve individuals with disabilities who are minorities, including those with the most significant disabilities in accordance with subsection 6.6 of the State Plan supplement, and individuals with disabilities who have been unserved or underserved by the vocational rehabilitation program;
 - C. as applicable, the plan of the state for establishing, developing or improving community rehabilitation programs;

- D. strategies to improve the performance of the state with respect to the evaluation standards and performance indicators established pursuant to Section 106 of the Rehabilitation Act; and
 - E. strategies for assisting other components of the statewide work force investment system in assisting individuals with disabilities.
2. Attachment 4.11 (d) describes how the designated state agency uses these strategies to:
- A. address the needs identified in the assessment conducted under paragraph 4.11(a) and achieve the goals and priorities identified in the State Plan attachments under paragraph 4.11(c);
 - B. support the innovation and expansion activities identified in subparagraph 4.12(a)(1) and (2) of the plan; and
 - C. overcome identified barriers relating to equitable access to and participation of individuals with disabilities in the State Vocational Rehabilitation Services Program and State Supported Employment Services Program.
- (e) Evaluation and reports of progress.
- 1. The designated state unit and the State Rehabilitation Council, if the state unit has a council, jointly submits to the commissioner an annual report on the results of an evaluation of the effectiveness of the vocational rehabilitation program and the progress made in improving the effectiveness of the program from the previous year.
 - 2. Attachment 4.11(e)(2):
 - A. provides an evaluation of the extent to which the goals identified in Attachment 4.11(c)(1) and, if applicable, Attachment 4.11(c)(3) were achieved;
 - B. identifies the strategies that contributed to the achievement of the goals and priorities;
 - C. describes the factors that impeded their achievement, to the extent they were not achieved;
 - D. assesses the performance of the state on the standards and indicators established pursuant to Section 106 of the Rehabilitation Act; and
 - E. provides a report consistent with paragraph 4.12(c) of the plan on how the funds reserved for innovation and expansion activities were utilized in the preceding year.

4.12 Innovation and expansion.

(Section 101(a)(18) of the Rehabilitation Act; 34 CFR 361.35)

- (a) The designated state agency reserves and uses a portion of the funds allotted to the state under Section 110 of the Rehabilitation Act for the:
 - 1. development and implementation of innovative approaches to expand and improve the provision of vocational rehabilitation services to individuals with disabilities under this State Plan, particularly individuals with the most significant disabilities, consistent with the findings of the statewide assessment identified in Attachment 4.11(a) and goals and priorities of the state identified in Attachments 4.11(c)(1) and, if applicable, Attachment 4.11(c)(3); and
 - 2. support of the funding for the State Rehabilitation Council, if the state has such a council, consistent with the resource plan prepared under Section 105(d)(1) of the Rehabilitation Act and 34 CFR 361.17(i), and the funding of the Statewide Independent Living Council, consistent with the resource plan prepared under Section 705(e)(1) of the Rehabilitation Act and 34 CFR 364.21(i).
- (b) Attachment 4.11 (d) describes how the reserved funds identified in subparagraph 4.12(a)(1) and (2) will be utilized.
- (c) Attachment 4.11(e)(2) describes how the reserved funds were utilized in the preceding year.

4.13 Reports.

(Section 101(a)(10) of the Rehabilitation Act; 34 CFR 361.40)

- (a) The designated state unit submits reports in the form and level of detail and at the time required by the commissioner regarding applicants for and eligible individuals receiving services under the State Plan.
- (b) Information submitted in the reports provides a complete count, unless sampling techniques are used, of the applicants and eligible individuals in a manner that permits the greatest possible cross-classification of data and protects the confidentiality of the identity of each individual.

Preprint - Section 5: Administration of the Provision of Vocational Rehabilitation Services

5.1 Information and referral services.

(Sections 101(a)(5)(D) and (20) of the Rehabilitation Act; 34 CFR 361.37)

The designated state agency has implemented an information and referral system that is adequate to ensure that individuals with disabilities, including individuals who do not meet the agency's order of selection criteria for receiving vocational rehabilitation services if the agency is operating on an order of selection, are provided accurate vocational rehabilitation information and guidance, including counseling and referral for job placement, using appropriate modes of communication, to assist such individuals in preparing for, securing, retaining or regaining employment, and are referred to other appropriate federal and state programs, including other components of the statewide work force investment system in the state.

5.2 Residency.

(Section 101(a)(12) of the Rehabilitation Act; 34 CFR 361.42(c)(1))

The designated state unit imposes no duration of residence requirement as part of determining an individual's eligibility for vocational rehabilitation services or that excludes from services under the plan any individual who is present in the state.

5.3 Ability to serve all eligible individuals; order of selection for services.

- (a) The designated state unit is able to provide the full range of services listed in Section 103(a) of the Rehabilitation Act and 34 CFR 361.48, as appropriate, to all eligible individuals with disabilities in the state who apply for services. Yes
- (b) If No:
 - 1. Individuals with the most significant disabilities, in accordance with criteria established by the state, are selected first for vocational rehabilitation services before other individuals with disabilities.
 - 2. Attachment 4.11(c)(3):
 - A. shows the order to be followed in selecting eligible individuals to be provided vocational rehabilitation services;
 - B. provides a justification for the order of selection; and
 - C. identifies the state's service and outcome goals and the time within which these goals may be achieved for individuals in each priority category within the order.
 - 3. Eligible individuals who do not meet the order of selection criteria have access to the services provided through the designated state unit's information and referral system established under Section 101(a)(20) of the Rehabilitation Act, 34 CFR 361.37, and subsection 5.1 of this State Plan.

5.4 Availability of comparable services and benefits.

(Sections 101(a)(8) and 103(a) of the Rehabilitation Act; 34 CFR 361.53)

- (a) Prior to providing any vocational rehabilitation services, except those services identified in paragraph (b), to an eligible individual or to members of the individual's family, the state unit determines whether comparable services and benefits exist under any other program and whether those services and benefits are available to the individual.
- (b) The following services are exempt from a determination of the availability of comparable services and benefits:
 - 1. assessment for determining eligibility and vocational rehabilitation needs by qualified personnel, including, if appropriate, an assessment by personnel skilled in rehabilitation technology;
 - 2. counseling and guidance, including information and support services to assist an individual in exercising informed choice consistent with the provisions of Section 102(d) of the Rehabilitation Act;
 - 3. referral and other services to secure needed services from other agencies, including other components of the statewide work force investment system, through agreements developed under Section 101(a)(11) of the Rehabilitation Act, if such services are not available under this State Plan;
 - 4. job-related services, including job search and placement assistance, job retention services, follow-up services, and follow-along services;
 - 5. rehabilitation technology, including telecommunications, sensory and other technological aids and devices; and
 - 6. post-employment services consisting of the services listed under subparagraphs (1) through (5) of this paragraph.
- (c) The requirements of paragraph (a) of this section do not apply if the determination of the availability of comparable services and benefits under any other program would interrupt or delay:
 - 1. progress of the individual toward achieving the employment outcome identified in the individualized plan for employment;
 - 2. an immediate job placement; or
 - 3. provision of vocational rehabilitation services to any individual who is determined to be at extreme medical risk, based on medical evidence provided by an appropriate qualified medical professional.
- (d) The governor in consultation with the designated state vocational rehabilitation agency and other appropriate agencies ensures that an interagency agreement or other mechanism for interagency coordination that meets the requirements of Section 101(a)(8)(B)(i)-(iv) of the Rehabilitation Act takes effect between the designated state unit and any appropriate public entity, including the state Medicaid program, a public institution of higher education, and a component of the statewide work force investment system to ensure the provision of the vocational rehabilitation services identified in Section 103(a) of the Rehabilitation Act and 34 CFR 361.48, other than the services identified in paragraph (b) of this section, that are included in the individualized plan for employment of an eligible individual, including the provision of those vocational rehabilitation services during the pendency of any dispute that may arise in the implementation of the interagency agreement or other mechanism for interagency coordination.

5.5 Individualized plan for employment.

(Section 101(a)(9) of the Rehabilitation Act; 34 CFR 361.45 and .46)

- (a) An individualized plan for employment meeting the requirements of Section 102(b) of the Rehabilitation Act and 34 CFR 361.45 and .46 is developed and implemented in a timely manner

for each individual determined to be eligible for vocational rehabilitation services, except if the state has implemented an order of selection, and is developed and implemented for each individual to whom the designated state unit is able to provide vocational rehabilitation services.

- (b) Services to an eligible individual are provided in accordance with the provisions of the individualized plan for employment.

5.6 Opportunity to make informed choices regarding the selection of services and providers.

(Sections 101(a)(19) and 102(d) of the Rehabilitation Act; 34 CFR 361.52)

Applicants and eligible individuals or, as appropriate, their representatives are provided information and support services to assist in exercising informed choice throughout the rehabilitation process, consistent with the provisions of Section 102(d) of the Rehabilitation Act and 34 CFR 361.52.

5.7 Services to American Indians.

(Section 101(a)(13) of the Rehabilitation Act; 34 CFR 361.30)

The designated state unit provides vocational rehabilitation services to American Indians who are individuals with disabilities residing in the state to the same extent as the designated state agency provides such services to other significant populations of individuals with disabilities residing in the state.

5.8 Annual review of individuals in extended employment or other employment under special certificate provisions of the fair labor standards act of 1938.

(Section 101(a)(14) of the Rehabilitation Act; 34 CFR 361.55)

- (a) The designated state unit conducts an annual review and reevaluation of the status of each individual with a disability served under this State Plan:
 - 1. who has achieved an employment outcome in which the individual is compensated in accordance with Section 14(c) of the Fair Labor Standards Act (29 U.S.C. 214(c)); or
 - 2. whose record of services is closed while the individual is in extended employment on the basis that the individual is unable to achieve an employment outcome in an integrated setting or that the individual made an informed choice to remain in extended employment.
- (b) The designated state unit carries out the annual review and reevaluation for two years after the individual's record of services is closed (and thereafter if requested by the individual or, if appropriate, the individual's representative) to determine the interests, priorities and needs of the individual with respect to competitive employment or training for competitive employment.
- (c) The designated state unit makes maximum efforts, including the identification and provision of vocational rehabilitation services, reasonable accommodations and other necessary support services, to assist the individuals described in paragraph (a) in engaging in competitive employment.
- (d) The individual with a disability or, if appropriate, the individual's representative has input into the review and reevaluation and, through signed acknowledgement, attests that the review and reevaluation have been conducted.

5.9 Use of Title I funds for construction of facilities.

(Sections 101(a)(17) and 103(b)(2)(A) of the Rehabilitation Act; 34 CFR 361.49(a)(1), .61 and .62(b))

If the state elects to construct, under special circumstances, facilities for community rehabilitation programs, the following requirements are met:

- (a) The federal share of the cost of construction for facilities for a fiscal year does not exceed an amount equal to 10 percent of the state's allotment under Section 110 of the Rehabilitation Act for that fiscal year.
- (b) The provisions of Section 306 of the Rehabilitation Act that were in effect prior to the enactment of the Rehabilitation Act Amendments of 1998 apply to such construction.

- (c) There is compliance with the requirements in 34 CFR 361.62(b) that ensure the use of the construction authority will not reduce the efforts of the designated state agency in providing other vocational rehabilitation services other than the establishment of facilities for community rehabilitation programs.

5.10 Contracts and cooperative agreements.

(Section 101(a)(24) of the Rehabilitation Act; 34 CFR 361.31 and .32)

- (a) Contracts with for-profit organizations.

The designated state agency has the authority to enter into contracts with for-profit organizations for the purpose of providing, as vocational rehabilitation services, on-the-job training and related programs for individuals with disabilities under Part A of Title VI of the Rehabilitation Act, upon the determination by the designated state agency that for-profit organizations are better qualified to provide vocational rehabilitation services than nonprofit agencies and organizations.

- (b) Cooperative agreements with private nonprofit organizations.

Attachment 4.8(b)(3) describes the manner in which the designated state agency establishes cooperative agreements with private nonprofit vocational rehabilitation service providers.

Preprint - Section 6: Program Administration

6.1 Designated state agency.

(Section 625(b)(1) of the Rehabilitation Act; 34 CFR 363.11(a))

The designated state agency for vocational rehabilitation services identified in paragraph 1.2 of the Title I State Plan is the state agency designated to administer the State Supported Employment Services Program authorized under Title VI, Part B, of the Rehabilitation Act.

6.2 Statewide assessment of supported employment services needs.

(Section 625(b)(2) of the Rehabilitation Act; 34 CFR 363.11(b))

Attachment 4.11(a) describes the results of the comprehensive, statewide needs assessment conducted under Section 101(a)(15)(a)(1) of the Rehabilitation Act and subparagraph 4.11(a)(1) of the Title I State Plan with respect to the rehabilitation needs of individuals with most significant disabilities and their need for supported employment services, including needs related to coordination.

6.3 Quality, scope and extent of supported employment services.

(Section 625(b)(3) of the Rehabilitation Act; 34 CFR 363.11(c) and .50(b)(2))

Attachment 6.3 describes the quality, scope and extent of supported employment services to be provided to individuals with the most significant disabilities who are eligible to receive supported employment services. The description also addresses the timing of the transition to extended services to be provided by relevant state agencies, private nonprofit organizations or other sources following the cessation of supported employment service provided by the designated state agency.

6.4 Goals and plans for distribution of Title VI, Part B, funds.

(Section 625(b)(3) of the Rehabilitation Act; 34 CFR 363.11(d) and .20)

Attachment 4.11(c)(4) identifies the state's goals and plans with respect to the distribution of funds received under Section 622 of the Rehabilitation Act.

6.5 Evidence of collaboration with respect to supported employment services and extended services.

(Sections 625(b)(4) and (5) of the Rehabilitation Act; 34 CFR 363.11(e))

Attachment 4.8(b)(4) describes the efforts of the designated state agency to identify and make arrangements, including entering into cooperative agreements, with other state agencies and other

appropriate entities to assist in the provision of supported employment services and other public or nonprofit agencies or organizations within the state, employers, natural supports, and other entities with respect to the provision of extended services.

6.6 Minority outreach.

(34 CFR 363.11(f))

Attachment 4.11(d) includes a description of the designated state agency's outreach procedures for identifying and serving individuals with the most significant disabilities who are minorities.

6.7 Reports.

(Sections 625(b)(8) and 626 of the Rehabilitation Act; 34 CFR 363.11(h) and .52)

The designated state agency submits reports in such form and in accordance with such procedures as the commissioner may require and collects the information required by Section 101(a)(10) of the Rehabilitation Act separately for individuals receiving supported employment services under Part B, of Title VI and individuals receiving supported employment services under Title I of the Rehabilitation Act.

Preprint - Section 7: Financial Administration

7.1 Five percent limitation on administrative costs.

(Section 625(b)(7) of the Rehabilitation Act; 34 CFR 363.11(g)(8))

The designated state agency expends no more than five percent of the state's allotment under Section 622 of the Rehabilitation Act for administrative costs in carrying out the State Supported Employment Services Program.

7.2 Use of funds in providing services.

(Sections 623 and 625(b)(6)(A) and (D) of the Rehabilitation Act; 34 CFR 363.6(c)(2)(iv), .11(g)(1) and (4))

- (a) Funds made available under Title VI, Part B, of the Rehabilitation Act are used by the designated state agency only to provide supported employment services to individuals with the most significant disabilities who are eligible to receive such services.
- (b) Funds provided under Title VI, Part B, are used only to supplement and not supplant the funds provided under Title I, Part B, of the Rehabilitation Act, in providing supported employment services specified in the individualized plan for employment.
- (c) Funds provided under Part B of Title VI or Title I of the Rehabilitation Act are not used to provide extended services to individuals who are eligible under Part B of Title VI or Title I of the Rehabilitation Act.

Preprint - Section 8: Provision of Supported Employment Services

8.1 Scope of supported employment services.

(Sections 7(36) and 625(b)(6)(F) and (G) of the Rehabilitation Act; 34 CFR 361.5(b)(54), 363.11(g)(6) and (7))

- (a) Supported employment services are those services as defined in Section 7(36) of the Rehabilitation Act and 34 CFR 361.5(b)(54).
- (b) To the extent job skills training is provided, the training is provided on-site.
- (c) Supported employment services include placement in an integrated setting for the maximum number of hours possible based on the unique strengths, resources, priorities, concerns, abilities, capabilities, interests and informed choice of individuals with the most significant disabilities.

8.2 Comprehensive assessments of individuals with significant disabilities.

(Sections 7(2)(B) and 625(b)(6)(B); 34 CFR 361.5(b)(6)(ii) and 363.11(g)(2))

The comprehensive assessment of individuals with significant disabilities conducted under Section 102(b)(1) of the Rehabilitation Act and funded under Title I of the Rehabilitation Act includes consideration of supported employment as an appropriate employment outcome.

8.3 Individualized plan for employment.

(Sections 102(b)(3)(F) and 625(b)(6)(C) and (E) of the Rehabilitation Act; 34 CFR 361.46(b) and 363.11(g)(3) and (5))

- (a) An individualized plan for employment that meets the requirements of Section 102(b) of the Rehabilitation Act and 34 CFR 361.45 and .46 is developed and updated using funds under Title I.
- (b) The individualized plan for employment:
 - 1. specifies the supported employment services to be provided;
 - 2. describes the expected extended services needed; and
 - 3. identifies the source of extended services, including natural supports, or, to the extent that it is not possible to identify the source of extended services at the time the individualized plan for employment plan is developed, a statement describing the basis for concluding that there is a reasonable expectation that sources will become available.
- (c) Services provided under an individualized plan for employment are coordinated with services provided under other individualized plans established under other federal or state programs.

Attachment 4.2(c) Input of State Rehabilitation Council

Required annually by all agencies except those agencies that are independent consumer-controlled commissions.

Identify the Input provided by the state rehabilitation council, including recommendations from the council's annual report, the review and analysis of consumer satisfaction, and other council reports. Be sure to also include:

- the Designated state unit's response to the input and recommendations; and
- explanations for the designated state unit's rejection of any input or recommendation of the council.

Input and Recommendations from the North Carolina State Rehabilitation Council

During FFY 2013, members of the State Rehabilitation Council provided input through various venues as follows:

- The Council's Executive Committee addresses State Plan development, implementation, and progress towards both Plan goals and SRC goals within the Goals, Priorities and Strategies section of the State Plan during y meetings with the Division's director and staff. The full council also provides input into the state plan and needs assessment planning processes regularly during the quarterly meetings.
- The SRC Consumer Input and Public Outreach Committee planned and conducted two stakeholder input forums in Wilmington, NC and Concord, NC and incorporated the input into the recommendations presented below.
- Over the course of the FFY 2013, the SRC's Policy and Rules Committee reviewed and provided feedback on policy drafts including subjects pertaining to the following areas:
 - Comparable Benefits
 - Concurrent Records of Service Policy
 - Case Service Authorizations
 - Statewide joint VR/IL Budget suspension
 - Telecommunications
 - Consumer Transportation Needs Assessment
 - Parental Consent Letter
 - Durable medical equipment
 - Eligibility Determinations
 - Vehicle Purchase Contributions
 - Vehicle Modifications/Vehicle Repairs
 - Medical Consultants
 - Security and Privacy Policy Directive
 - Community Based Assessments

Other recommendations NC DVRS received from the North Carolina State Rehabilitation Council:

Recommendation 1: In support of their strategic plan pertaining to legislative advocacy, the Council recommended again this year for the Division to prepare for their distribution, customized reports for each NC legislative district featuring the beneficial return on investment that the VR program has on consumers and on the economy of each district within NC.

Division's Response: The Division's Planning and Evaluation unit will again support this request, revising the customized reports based on input and also added success stories to provide a human element to the data presented. The reports will be prepared and distributed to all NC Legislators during the short session.

Recommendation 2: Whereas the Council recognizes that employment options are generally decreasing in rural NC, and since many consumers cannot relocate to more urban areas due to their dependence on natural supports, the Division's self-employment option should remain a well-supported service option within the Division.

Division's Response: The Division supports this recommendation and expects to continue refining its current processes, partnerships and policies during FFY 2015 to maintain this service as a viable option for individuals who are well-matched to this type of employment as determined through its evaluative processes.

Recommendation 3: The Council recommended for the Division to submit a request to the DHHS legislative liaison to make changes in language to N.C.G.S. 138-5(a)(1) to bring the mileage reimbursement rate in line with the Federal IRS standard rate for mileage reimbursement for travel related to meeting attendance and participation in Council official business.

Division's Response: The Division prepared the recommended changes and submitted them through the designated channels and is awaiting changes to be made to the statute.

Recommendation 4: The Council recommended for the quarterly full council meetings to contain a standing item for the Client Assistance Program to give an activity update. Further, the council recommended for a standardized set of questions and topic areas to be provided as a standard guideline to be used for regional director and/or a regional unit manager reports during quarterly meetings to allow managers to provide updates for local activities, developments and to express any concerns to the Council.

Division's Response: The Division has incorporated the recommended changes and will continue with these standing topics until the Council recommends further adjustments.

Recommendation 5: The Council recommends to continue to jointly conduct consumer input sessions to be held twice annually collecting input from various communities across the state and to strongly encourage staff attendance at such sessions whenever possible.

Division's Response: The Division will continue to actively support jointly conducted input sessions twice annually canvassing various communities across the state focusing on how the VR program is addressing consumers' vocational rehabilitation needs through its service provision.

Recommendation 6: Whereas the Council recognized that some consumers had been adversely impacted by a policy change that discontinued division contributions to purchasing the unmodified-vehicle portion of consumers' vehicle modification packages, the Council requested, through a letter to the Secretary of Health and Human Services, that individuals for whom a purchase had already been approved be granted an exception.

Division's Response: The Division, in support of a favorable response from the Deputy Secretary, has reviewed and recommended exceptions to grandfathered cases for clients who were already in the vehicle purchase/modification prior to July 1, 2013 who also met all previous policy requirements, including viable employment with expected earnings to meet or exceed Substantial Gainful Activity (SGA). As a result, each case already in process has been carefully reviewed, and exceptions granted on a case-by-case basis.

Recommendation 7: As the Council is concerned about providing responsive services to consumers and realizes the Division's abilities in this area are impeded when high vacancy rates occur within the Division, the Council recommends that the Division provide regular updates regarding key vacancies, including direct service positions such as counseling positions, so that the Council may advocate appropriately as included within the Council's current 2014-16 strategic plan.

Division's Response: The Division supports this recommendation and will continue to work with Council members to regularly provide updates through statewide and regional vacancy reports.

Public Participation in the State Plan Process In addition to posting the current state plan on the Division's public website and providing an active e-mail link for submitting comments, the Division conducted five public meetings throughout the state regarding the North Carolina Vocational Rehabilitation State Plan and the Supported Employment Program State Plan Supplement. The meeting

locations included Lumberton, Washington, Hickory, Albemarle, and Durham. The public meetings were held after providing adequate notice of the meetings and providing procedures for the public, including individuals with disabilities, to comment on state plan content, service or policy concerns for the development of the FFY 2015 State Plan. Notices of the public meetings were sent to a comprehensive and diverse list of individuals, advocacy groups and other interested stakeholders via email, list serves and press releases. Additionally, invitations to 500 active consumers per location were also mailed out to individuals located within easy driving distance to the public input meetings. Alternate communication formats were made available at the public meetings upon request and sign language interpreters were present at all meetings, to enable anyone who attended and required the services to participate fully. The public was encouraged to provide input into the State Plan annual update process in a variety of ways including: oral comments at any public meeting, fax, and email, through website or other submission of written comments for a designated period. The published deadline to submit written input into the FFY 2015 State Plan was May 25, 2014.

The following is a summary of the major comments from the public meetings and submitted written comments relative to the State Plan and NC DVRS' Service Program:

- **Accessibility, Process, Communication & Capacity:**

- At the Durham public listening and discussion session and through written comments, representatives of Disability Rights North Carolina encouraged the Division to do what it could to make its application available online in an accessible format so that its application forms are widely available throughout the state. Further, the organization proposed to make applications available at all times at all One Stop locations statewide, for the convenience of individuals with disabilities, as to prevent unnecessary service trips. Disability Rights North Carolina also commented that the process of requesting DVRS services should place a minimum burden on the applicant to supply enough information to open a file and agree to cooperate. Further, they indicated that a lengthy application process can be a deterrent to individuals seeking services, and it should be minimized and made as simple as user friendly as possible. Finally, the organization suggested that the Division re-evaluate what is considered the date of the application and to view the point of initial contact as that date.
- At the Washington public listening and discussion session, a VR client who received services in support of his small business stated he required additional services, and that the services needed to maintain his business should be provided in a quick and responsive manner.

- **Community Rehabilitation Program Services:**

- At the Washington public listening and discussion session, a community rehabilitation program representative commented that the Division could be more effective in serving individuals if it maximized the referral potential to Community Rehabilitation Programs. She also requested quarterly adjustments to performance-based contracts instead of semi-annual adjustments, stating that resources could be better managed that way.
- At the Durham input session, a parent of a 33 year individual with autism who is highly functioning stated that while his son had a positive employment experience for a longer period of time in the past with follow along job coaching, he maintained that the amount of follow along time provided was not sufficient to help the consumer keep the job should a job crises occur, and that there needs to be increased funding for long term follow along so that crisis situations can be handled appropriately with enough follow along staff resources/hours if needed.
- At the Hickory input session, a representative from an IPS (Individualized Placement and Supports) supported employment model pilot project serving individuals with persistent mental illness, commended the collaborative approach between DVRS and MH/DD/SAS, and the team approach appears to be key in helping prevent relapses among that population.

- **School-to-Work Transition Services:**

- At the Hickory input session, a parent of a transitioning youth with most significant developmental disabilities commented that counselors need to have a better understanding of the unique needs and capabilities of who they are serving and not to take a standardized “one size fits all” approach, as she has observed. Further, she commented that there appears to be significant variability regarding resources available within each county or service area and that an inventory of resources and programs should be conducted to identify areas where programs need to be developed.
- Also at the Hickory session, parents of a most significantly disabled transitioning youth who transferred from another state indicated that they have found it difficult to navigate services for their child within a fairly confusing system between high school and vocational rehabilitation. They would like some navigational guide and also some examples of situations like theirs that project hope for her challenging pathway to employment, which will require multiple supports and identifying appropriate work and an appropriate and patient employer.
- A parent of a transitioning youth submitted a written comment she would like to see increased responsibility among VR staff in following up with consumers that have challenges in following through. Further, the parent felt that she was required to advocate too much on behalf of their child to receive the needed services. The parent also commented that when a consumer is only able to attend school part time and obtain employment part-time, they should be supported in both areas equally, and that youth with significant disabilities are often not equipped to be able to compete for summer employment to the extent they should.
- Through written comment, Disability Rights North Carolina encouraged the Division to continue to work towards earlier intervention in the transition process of young people with disabilities from school to work, supporting the belief that students with significant disabilities and their families need exposure to the culture of employment as early as possible. Disability Rights North Carolina wrote that they would like to see VR involvement with students with the most significant disabilities as early as middle school, beginning to build that expectation that employment is the first and best option for all individuals, regardless of disabilities. Disability Rights North Carolina also stated that they would expect a higher rate of applications for VR services among those students with an IEP (Individualized Employment Plan) in place and suggested that there is an insufficient focus placed on promoting and making the DVRS process readily available. Additional related suggestions were submitted:
 - Provide applications to Local Educational Authorities (LEAs) for distribution to Exceptional Children (EC) students and their families at each IEP meeting beginning when the student is 14, whether or not a representative of DVRS is present.
 - Likewise, EC directors and teachers should be provided a supply of applications to distribute as appropriate outside the IEP context.

- **Collaboration:**

- At the Lumberton input session, an attendee suggested that VR should be more actively involved in NC Workforce Solutions’ rapid response team to help identify individuals with disabilities who may be downsized by a company, since many need the Division’s assistance and are motivated to re-enter the workforce relatively quickly.
- Also at Lumberton, an attendee suggested that the Division’s counselors and business relations representatives should routinely partner with consumers who they successfully assist with employment, and ask that VR clients “pay it forward” by notifying their former counselor when they know of a job opening at their place of employment.

- An attendee at the Lumberton session suggested that employees with disabilities should engage in Support/Affinity groups as resources for additional supports, as many do not have supports and can benefit from connecting with a support group.
- One commenter suggested that the Division research grant opportunities for the re-entry of ex-offenders with disabilities into the workforce, and to increase collaborative efforts in that area.
- Disability Rights North Carolina submitted a written comment that strongly encouraged efforts to promote access to information about the Division through the Department of Commerce's related web sites. This was noted as a particular concern in this era when One-Stop Career Centers have automated many of the services formerly conducted in-person: We also propose that DVRS applications be made available at all times at the One Stop locations, as specifically noted in the regulations.

Identified Barriers/Needs:

Two families representing young individuals with autism commented that lack of funding for long-term follow-along job coaching prevents adequate intervention to curtail job crises situations.

Attendees at several of the sessions commented that the lack of transportation continues to be a significant barrier to employment for people with disabilities, especially in rural areas where there are few options and for late night or weekend employment, when public transportation is unavailable. A commenter at the Washington input session stated that some employers in that region have successfully provided transportation services at a very reasonable price for their workers using van pool services.

One attendee commented that group homes often require tenants to contribute significant portions of their earnings toward their transportation and stated the cost was unaffordable.

At the Durham input session, a local Center for Independent Living (CIL) staff member indicated that many consumers in retail or other service industries begin employment with adequate hours and wages to sustain them, but sometimes their work hours are reduced and that they require another part time job or a job with a consistent schedule. She stated that the Division should provide job search or job placement assistance for former clients in this type of situation.

Summary of the North Carolina VR Consumer Satisfaction Survey Results for FFY 2013

Mandate

The consumer satisfaction survey is conducted to meet the mandate of Section 105 (c) of the Rehabilitation Act of 1973, as amended, which states that the State Rehabilitation Council (SRC) shall, among performing other required functions: Conduct a review and analysis of the effectiveness of, and client satisfaction with:

- the functions performed by the designated State agency;
- vocational rehabilitation services provided by State agencies and other public and private entities responsible for providing vocational rehabilitation services to individuals with disabilities under this Act; and
- employment outcomes achieved by eligible individuals receiving services under this title, including the availability of health and other employment benefits in connection with such employment outcomes.

Survey Administration

The VR consumer satisfaction survey is a coordinated effort between by the State Rehabilitation Council, Division Management, and staff of the Planning and Evaluation Unit of the Division. For federal fiscal year 2013, surveys were sent to former consumers of the Division whose cases were closed either as successfully rehabilitated in employment (status 26) or not successfully rehabilitated after VR services

were provided under an individualized plan for employment (status 28). Three methods of communication for the purpose of survey data collection were employed, in succession:

- First, following case closure, if the former consumer had a valid email recorded in their electronic case file, the Division's Planning and Evaluation Unit sent an email invitation with a link to an online version of the survey. The electronic survey was created and administered through NC DHHS SurveyMax, a web-based survey tool developed by the NC DHHS Division of Information Resources Management (DIRM) specifically for the timely collection of information regarding consumer satisfaction with services.
- If an email address was not recorded or the former consumer did not respond to the email invitation, a survey packet with a self-administered written questionnaire was mailed to the consumer's mailing address on file. The survey packet included a letter of instruction and a tri-fold questionnaire form with a printed self-return address and prepaid postage billed to a bulk mail rate account. The Division contracted with Community Workforce Solutions, a community rehabilitation program, for the preparation and mailing of survey packets.
- Former consumers who did not complete an online or written survey questionnaire were included in the sample frame to be selected at random for telephone surveys. Telephone surveys were conducted in April and November 2013, through a contract with the Center for Urban Affairs and Community Services at the North Carolina State University.

Description of the Satisfaction Survey Questionnaire

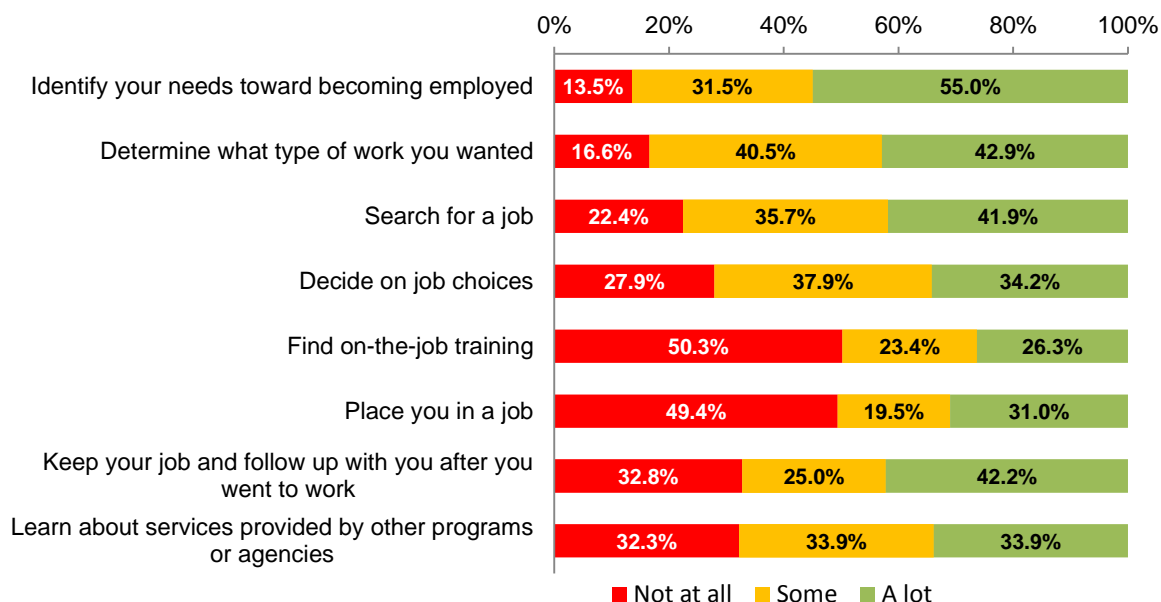
In an effort to make the survey more user-friendly, the format and layout of the survey questionnaire was redesigned for federal fiscal year 2013. These changes included combining separate items using matrix response tables with shading to visually separate the sub-questions. There was no change to overall questionnaire content. The survey questionnaire is now comprised of seven main items that:

- (1) identify who is completing the questionnaire: the VR consumer with or without help, a family member, or a caregiver;
- (2) measure how well the VR program helped the former consumer with different aspects of their rehabilitation program;
- (3) assess whether the consumer received information about (a) the Client Assistance Program (CAP), and (b) if they were informed of their right to appeal Division decisions;
- (4) measure the respondent's satisfaction with their rehabilitation counselor with regard to different aspects of the counselor-client relationship;
- (5) measure the respondent's satisfaction with their involvement in their rehabilitation program;
- (6) identify any barriers that prevented the former consumer from obtaining employment; and
- (7) measure the respondent's (a) satisfaction with response time, and (b) overall satisfaction with the NC VR Program.

Summary of Results

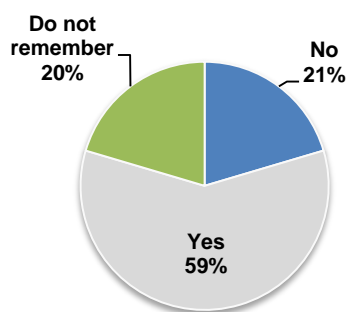
For federal fiscal year 2013, there were a total 1,874 survey responses: 1,113 (59%) were completed by mail; 581 (31%) were completed by telephone; and 180 (10%) were completed online. The total number of responses via these three communication channels is the highest since federal fiscal year 2002. The charts below show the survey responses for each question:

Did the NC Division of Vocational Rehabilitation Services (VR) Help You?

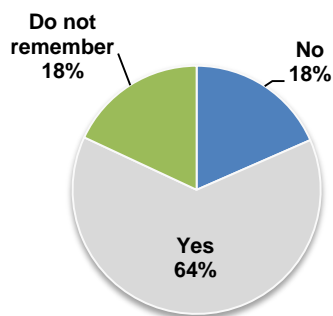


Did your counselor inform you about CAP and your right to appeal?

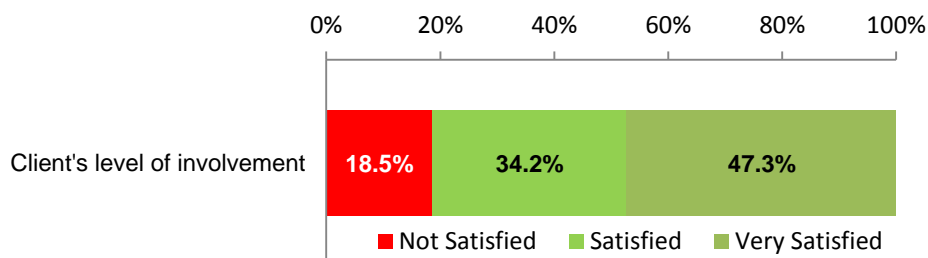
...that if you had a concern about services that you could contact the Client Assistance Program (CAP)?



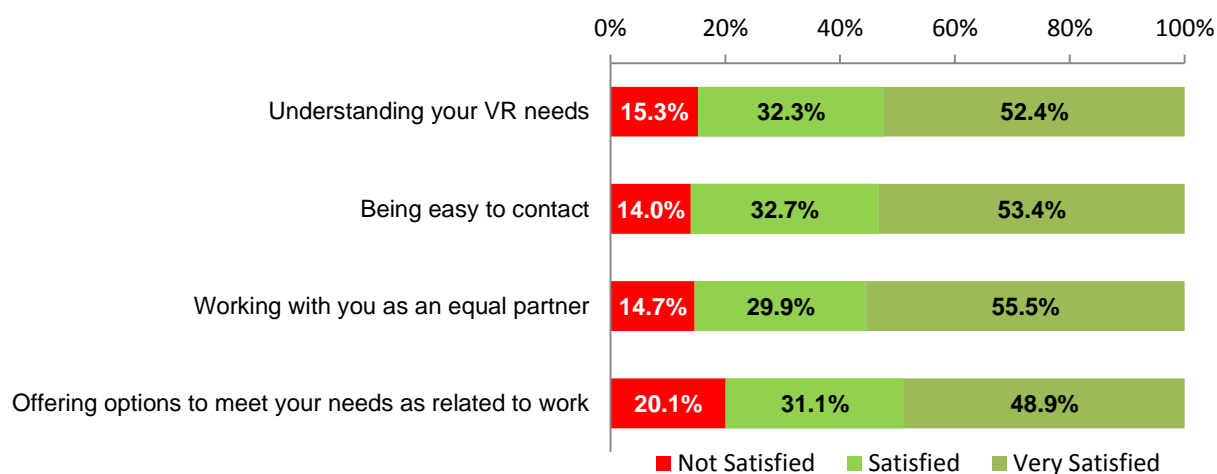
...about your right to appeal agency decisions with which you disagree?



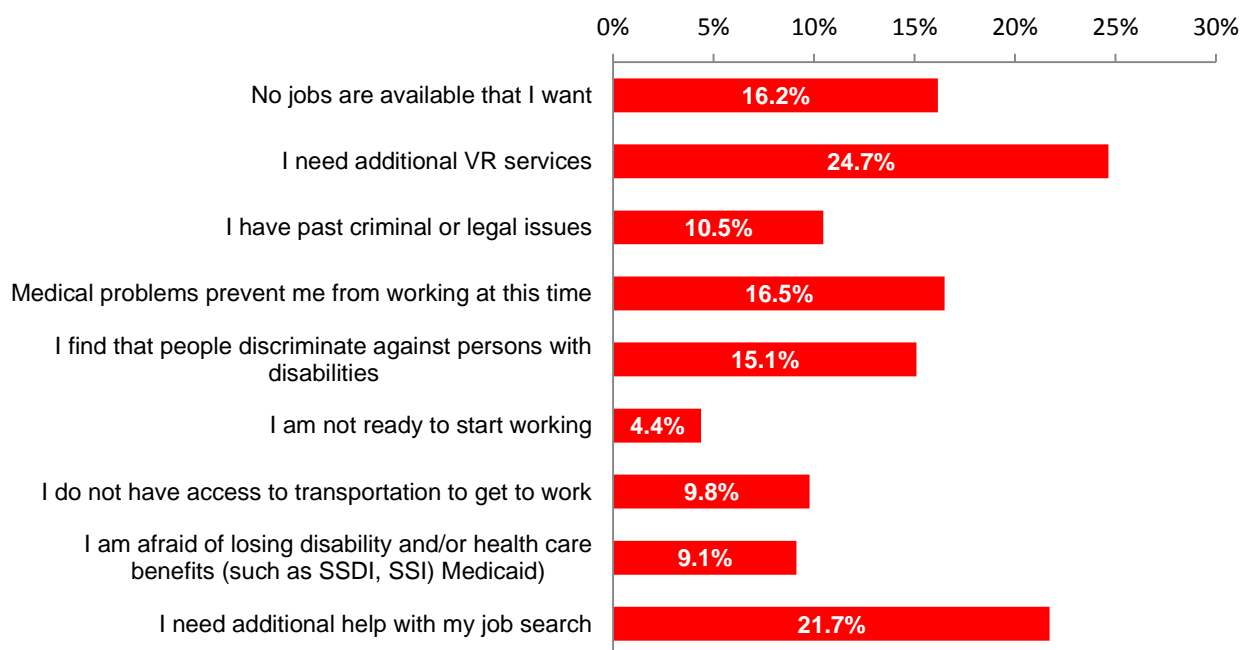
How satisfied were you with your level of involvement in your rehabilitation program?



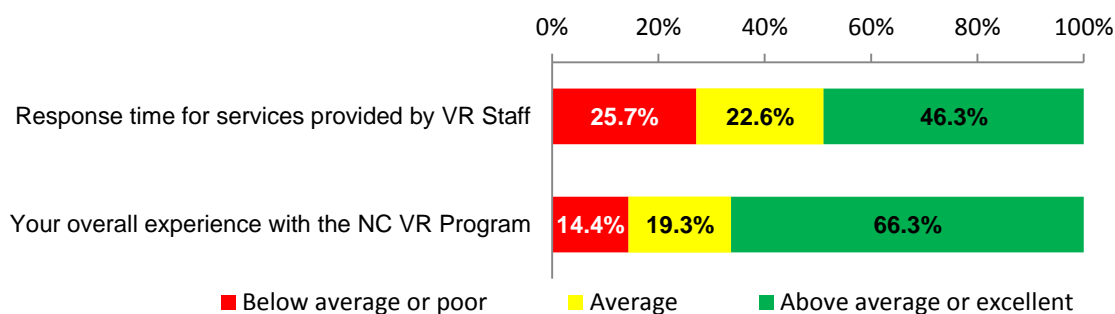
How satisfied were you with your counselor with your counselor in terms of:



Have you experienced any of the following barriers in obtaining employment?



How satisfied were you with response time and your overall VR experience?



Attachment 4.7(b)(3) Request for Waiver of Statewideness

Identify the types of services to be provided by the program for which the waiver of statewideness is requested.

The waiver request should also include:

- a written assurance from the local public agency that it will make available to the designated state unit the non-federal share of funds;
- a written assurance that designated state unit approval will be obtained for each proposed service before it is put into effect;
- a written assurance that all state plan requirements will apply to all services approved under the waiver.

This attachment does not apply to the NC Division of Vocational Rehabilitation Services for federal fiscal year 2015.

Attachment 4.8(b)(1) Cooperative Agreements with Agencies Not Carrying Out Activities Under the Statewide Workforce Investment System

Describe interagency cooperation with and utilization of the services and facilities of agencies and programs that are not carrying out activities through the statewide workforce investment system with respect to

- Federal, state, and local agencies and programs;
- if applicable, Programs carried out by the Under Secretary for Rural Development of the United States Department of Agriculture; and
- if applicable, state use contracting programs.

Division's Response

The NC Division of Vocational Rehabilitation Services (NC DVRS) extensively collaborates with and utilizes the services of federal, state, and local entities to achieve its mission on behalf of NC citizens with disabilities. The Division routinely pursues improving its overall effectiveness through working relationships, partnerships, contracts and formal or informal agreements with entities at all of these levels. NC DVRS maintains written cooperative agreements with various federal, state, and local agencies. These include but are not limited to the Social Security Administration; the United States Office of Federal Contract Compliance Programs; the North Carolina Division of Medical Assistance; the North Carolina Division of Services for Deaf and Hard of Hearing; NC Office of Long Term Services and Supports; NC Division of Social Services; the North Carolina Division of Mental Health, Developmental Disabilities, and Substance Abuse; and numerous local school systems, hospitals, and physical medicine and rehabilitation centers. The Easter Seals / United Cerebral Palsy Society of North Carolina, the National Multiple Sclerosis Society, the American Heart Association, and the North Carolina Arthritis Foundation are examples of consumer and advocacy groups for individuals with disabilities with which the Division has agreements. The above referenced agreements facilitate the maintenance of the highest feasible level of communication and coordination in the joint development and implementation of operational methods including, where applicable:

- Assisting consumers, their families, and advocates in accessing services from the Division and from the other agencies and entities;
- Referral of individuals who have disabilities and especially those who have severe disabilities to the Division for services;
- Referral by the Division to other agencies or entities for the various supportive services and assistance available;
- Determination of the responsibility of each agency or entity in making referrals, in serving individuals jointly, and in identifying resources;
- Provision of educational information regarding the services, including equipment and assistive technology, available and eligibility criteria of the Division and of the other agency or entity;
- Joint training of staff in areas pertaining to services available and procedures of the Division and the other agency or entity;
- Shared funding for Division position and program costs and co-location of Division staff with staff from the other agency or entity where co-location would be effective and feasible;
- Developing means to promote greater awareness and greater utilization of the provisions of the Americans with Disabilities Act;
- Provision for the sharing of information between agencies upon receipt of client permission and with regard to maintaining confidentiality;
- Establishing an evaluation system to determine levels of competency of paraprofessionals such as interpreters for the deaf who wish to serve as vendors for the Division;
- Enhancing post-secondary training supports to assist in the transition to employment; • Improving the public image of the employment capabilities of individuals in various disability groups;

- Assessing the effectiveness of the cooperative agreements;
- Jointly promoting improvement in the quality of life through comprehensive approaches to the improved health of consumers jointly served and through services to family members;
- Jointly promoting ethical research practices to develop improved medical and other disability related interventions;
- Promoting systems change through collaborative projects;
- Expanding services and community resources for unserved and underserved groups;
- Promotion of collaboration at the community office level offices between the Division and other agencies and entities;
- Through joint planning councils, providing joint input from the Division and from other agencies and entities for budgeting, service delivery, and policy changes for block grants, special demonstration projects, and other grants;
- Providing input regarding formulation of vocational services provided by other agencies and entities.

Coordination with the NC Statewide Independent Living Council and Independent Living Centers

Centers for Independent Living (CILs) are consumer-controlled, cross-disability, community-based non-residential, private non-profit organizations that provide programs and services for people with all types of disabilities and their families. The goal of CILs is to promote and support opportunities for people with disabilities to fully participate in an integrated community and search for the possibilities to live as they choose. These centers are funded through Title VII of the Rehabilitation Act of 1973, as amended. Information and referral, independent living skills training, advocacy, and peer counseling are the four core services each center provides. In addition to these core services, the centers may provide additional services which are tailored to serve individuals with disabilities in their service area.

The Centers for Independent Living (CILs) in North Carolina work with the Division's local Vocational Rehabilitation, Independent Living Program and NC Assistive Technology Program staff to coordinate services for specific individuals and also to address areas of broader systemic impact such as community education/awareness and outreach to various disability groups.

The Statewide Independent Living Council (SILC) is an independent non-profit council (not an entity within a state agency) that is established under Section 705 of the Rehabilitation Act of 1973 as amended. The majority of its members are individuals with disabilities. The SILC is responsible for jointly developing and endorsing the State Plan for Independent Living in conjunction with the designated state unit (NC DVRS and NC Division of Services for the Blind). The duties of the SILC are to monitor, review, and evaluate the implementation of the State Plan for Independent Living. Further, the SILC is mandated to coordinate activities with the State Rehabilitation Council and other councils that address the needs of specific disability populations.

Interagency Cooperation and Use of Programs carried out by the Under Secretary for Rural Development of the USDA

The Division is actively collaborating with the USDA-funded statewide AgrAbility program whose mission is to educate and assist NC farmers, ranchers, farmworkers and their family members who have disabilities to enable them to remain actively engaged in production agriculture. The collaborative involves NC Agricultural and Technical State University, NC State University Bio and Agricultural Engineering Department, East Carolina University Agromedicine Institute, NC Cooperative Extension, and the NC network of Centers for Independent Living.

Further, the Division's consumer's benefit through the expertise and access to USDA programs, program funding and loans available through the NC Rural Center, which is represented through the Division's Small Business Advisory Committee (SBAC).

State Use Contracting Program

At this time, NC DVRS does not directly engage in formally established state use contracting program, where commodities or service determined to be of use to state agencies are purchased from community-based rehabilitation programs employing and training individuals with significant disabilities. NC DVRS does sponsor activities through several community rehabilitation programs that provide training services to the Division's consumers through contracts with entities such as the NC Department of Transportation for maintenance of facilities and distribution of safety campaign materials.

Attachment 4.8(b)(2) Coordination with Education Officials

- Describe the designated state unit's plans, policies, and procedures for coordination with education officials to facilitate the transition of students with disabilities from school to the receipt of vocational rehabilitation services, including provisions for the development and approval of an individualized plan for employment before each student determined to be eligible for vocational rehabilitation services leaves the school setting or, if the designated state unit is operating on an order of selection, before each eligible student able to be served under the order leaves the school setting.
- Provide information on the formal interagency agreement with the state educational agency with respect to
 - consultation and technical assistance to assist educational agencies in planning for the transition of students with disabilities from school to post-school activities, including VR services;
 - transition planning by personnel of the designated state agency and educational agency that facilitates the development and completion of their individualized education programs;
 - roles and responsibilities, including financial responsibilities, of each agency, including provisions for determining state lead agencies and qualified personnel responsible for transition services; and
 - procedures for outreach to and identification of students with disabilities who need transition services.

Part I. Description of Plans, Policies and Procedures for Coordination with Education Officials to Facilitate Provision of Transitional Services: General overview

The NC Division of Vocational Rehabilitation has renewed its state level memorandum of agreement (MOA) with NC Department of Public Instruction which outlines a collaborative partnership between the two agencies to provide state level approval and support for enhanced transition services to serve youth with disabilities. The Program Specialist for Transition Services compiles an annual report, as requested in our MOA, for NCDPI summarizing VR activity for the state fiscal year. The VR unit offices and local education agencies (LEA) customize a local MOA for their community to outline how they will work closely together, along with the local transition team to target specific needs in the agreement to provide transition services. The MOA allows for collaboration between VR staff and school transition personnel, sharing of information, joint participation in students' IEP meetings, and incorporating individualized transition portion of the IEP into the IPE. The Division's 91 local MOAs with the 115 LEAs in NC fund 111 school counselors and additional VR staff including casework assistants, technicians, vocational evaluators and business relations representatives (formerly job placement specialists) available to provide VR transition services in the local community. In areas where there is not an MOA in place, the local manager has designated a VR counselor to directly serve the youth with disabilities in the local schools. NC DVRS updated the transition policy in 2003 to emphasize the intense efforts to serve transition aged youth. Each VR unit office developed an action plan of transition activities to enhance areas such as:

- general outreach and information exchange to local school system;
- outreach to younger students;
- meeting with the transition coordinator;
- building administrative support for the transition program;
- relationship and transition team building with school transition staff;
- staff development for VR and school transition personnel;
- expanded involvement with WIA, Mental Health and other adult agencies that support the Individualized Education plan (IEP) and the Individualized Plan for Employment (IPE); and

- attending IEP meetings and identifying students who are at risk for dropping out. Many of NC public school personnel directly involved in providing transition services to students with disabilities are members of the national and North Carolina's division of the professional organization through the Council for Exceptional Children / Division of Career Development and Transition (DCDT). Since 2004, the VR state program specialist and VR school transition counselors have participated in NC-DCDT regional training meetings and the annual training conference sponsored by NC's DCDT. This participation allows for cooperative training and information sharing for improved partnerships between NC DVRS and school systems toward the provision of transition services in the local communities. Additionally, specific VR transition counselor training with LEA representation has been scheduled to address some specific training needs of our VR counselors and to foster greater teambuilding with our LEAs.

Plans for Coordination with Education Officials

The Division plans to maintain and strengthen its programmatic relationships with school transition services through its continued active participation by the Division's Transition Specialist and a school counselor on the State Capacity Building Team for Transition. This team, including NC Department of Public Instruction (NC DPI) leadership, NC Division of Vocational Rehabilitation Services, University Center for Development and Learning, Parent/Child Advocacy Agency, Business Representative and Local Education Agency (LEA) representative was formed in recent years to develop state-wide goals and provide better coordinated transition activities for students with disabilities to achieve better results with post-school outcomes, including obtaining employment or attending post-secondary education. Currently, the Statewide Transition Team is in process of finalizing the State Transition Plan which includes a Transition Toolkit for teachers and anticipates the development of toolkits for parents, students, and agencies that will be individualized at the local level.

Description of Policies and Procedures for Coordination with Education Officials

Through its casework policy, NC DVRS requires each local VR office with vocational rehabilitation counseling staff serving on a local school transition services team to send an annual report to the school systems with which the Division has a third party cooperatively funded program. This report includes data about services and expenditures for students with disabilities provided by the Division, and addresses how VR staff members worked with school staff in transition planning for students with significant and most significant disabilities. The annual report also addresses how the Division is partnering with the school system to address the work experience requirements of the Occupational Course of Study (OCS). Furthermore, a vocational rehabilitation counselor is assigned to serve each high school where no formal cooperative agreement exists. The designated staff visits these schools on an itinerant basis and implements a system for referral generation and their subsequent processing. This approach is expected to include a mechanism for identifying students with disabilities and at risk for dropping out of school. In order to plan effectively for the transition needs of students with disabilities in collaboration with other agencies and organizations, the Division's counselors are expected to be active participants addressing the Individualized Education Program (IEP) meeting transition issues when possible. NC DVRS vocational rehabilitation counselors are expected to participate both directly in IEP meetings and indirectly by other means in planning for the needs of VR clients. The Occupational Course of Study (OCS), as a pathway to an NC high school diploma, requires that students with marked disabilities that are eligible for this pathway participate in a specific number of hours of school-based, community/volunteer-based and competitive work experiences as part of the requirements. The implementation of this pathway in 2000 has enhanced VR's ability to develop an IPE to provide services specific to youth in transition early within the high school experience prior to exiting. Two specific services "In School Work Adjustment" and "Community Based Assessment and Training" are VR services provided through the IPE to support the student's success in the OCS pathway to a NC high school diploma. Paid internships can be used to assist students in exploring work and earning paid hours. These services, provided during the sophomore, junior, and senior years, further support transition from school to work.

Part II. Description of Development and Approval of Individualized Plan for Employment (IPE) for Transitioning Students

The Division's casework policies addressing the provision of transition services defines transition services as a coordinated set of activities for a student designed within an outcome-oriented process that promotes movement from school to post-school activities, including post-secondary education, vocational training, integrated employment (including supported employment), continuing and adult education, adult services, independent living, or community participation. Furthermore, NC DVRS policy states that the coordinated set of activities must be based upon the individual student's preferences and interests, and must include instruction, community experiences, the development of employment and other post-school adult living objectives and, if appropriate, acquisition of daily living skills and functional vocational evaluation. Finally, NC DVRS casework policies require that transition services must promote or facilitate the achievement of the employment outcome identified in the student's individualized plan for employment. In order to plan effectively for the transition needs of students with disabilities in collaboration with other agencies and organizations, NC DVRS rehabilitation counselors are expected to be active participants addressing the Individualized Education Plan (IEP) meeting transition issues when possible. Counselors are expected to participate both directly in IEP meetings and indirectly by other means in planning for the needs of VR consumers. A copy of the transition portion of the IEP is required to be maintained in the case record. Prior to developing the IPE, the VR counselor reviews the Individual Transition Plan (ITP) component for the Individual Education Plan and records any relevant ITP objectives as part of the IPE. The intent of this review is to coordinate educational programming and vocational programming for the benefit of the VR consumer. Additionally, the Division's policy stipulates that the development of the IPE with a student must be based on interest, aptitude, capabilities, strengths and informed choice. The job choice on the IPE for a student in transition may indicate a family of jobs rather than a specific job code, for example, Health Care Worker, Office Work, and Protective Services such as police, firefighter, or security guard. Division policy does require career exploration to be provided and documented in order to determine a more specific goal. Amended job choices including amendments at closure, must be accompanied by documentation reflecting the process and services that had an impact on the final job choice, including job shadowing, job sampling, guidance and counseling. Moreover, NC DVRS casework policy stipulates that the development and approval of an individualized plan for employment must be completed as early as possible during the transition planning process but, at the latest, by the time each student determined to be eligible for vocational rehabilitation services leaves the school setting. This includes students with disabilities who are eligible for VR services including eligible students served by the school under an IEP.

Part III. Description of the Formal Interagency Agreement between NC DVRS and the State Education Agencies

In order to ensure effective facilitation of the transition of students with disabilities from school to the receipt of vocational rehabilitation services, NC DVRS maintains both a joint formal agreement with the Exceptional Children and Career Technical Education Divisions of NC Department of Public Instruction and also maintains 91 separately held formal agreements with local education agencies (LEA's) or school programs. Within the formal interagency agreement between NC DVRS and NC DPI, mutual interagency responsibilities include:

- Mutual participation of appropriate personnel in the development of the transition component of the Individualized Education Program and the Individualized Plan for Employment for students with disabilities.
- Designation of an individual from Vocational Rehabilitation Services, Exceptional Children and Career Technical Education Divisions to serve as liaison with each other to represent the services of the two agencies.
- Exchange of information deemed pertinent and of mutual concern regarding service delivery.
- Interagency cooperation in transition planning for students with disabilities.
- A mutual system to be developed and maintained to ensure that appropriate referrals are made to each party.

Part III. A. Consultation and technical assistance to assist educational agencies in planning for the transition of students with disabilities from school to post-school activities, including VR services

1. A description of NC DVRS responsibilities pertaining to this area

Within the formal interagency agreement, the NC DVRS has responsibility to ensure the provision of an appropriate program of vocational rehabilitation services to each perspective VR client by:

- Providing administrative, technical and consultative services when needed through local, regional and state vocational rehabilitation services' staff to local school administrative units serving students with disabilities in transition programs. NC DVRS' program specialist for transition services and the state program consultant for intellectual disabilities and secondary education with DPI, cooperatively provide programmatic information, training and support to local school systems and to VR transition staff to maintain and enhance the quality of transition services for successful post-school outcomes for students with disabilities. The NC DVRS specialist provides regular technical support to schools by participating in and presenting at transition training institutes regarding transition services and adult service agencies. The NC DVRS specialist also visits and provides consultation and training at the local schools with transition teachers, coordinators, job coaches, and other professionals.
- Screening students with disabilities referred to NC DVRS by the local school administrators to determine eligibility for vocational rehabilitation services. Eligibility for vocational rehabilitation services is based on the presence of a physical or mental impairment which for the individual constitutes a substantial impediment to employment. The student must require vocational rehabilitation service to prepare for, secure, retain or regain employment. The determination of eligibility for vocational rehabilitation services provided by NC DVRS is the sole responsibility of NC DVRS and is not delegated.
- Administering all aspects of the NC DVRS vocational rehabilitation program services including the determination of eligibility, diagnostic and evaluation services, rehabilitation planning, transition services and the provision of a program of vocational rehabilitation services. Some services are subject to the student's financial eligibility and/or comparable benefits.
- Providing vocational assessment trial work and adjustment services to students with disabilities who have an identified need and meet eligibility requirements.
- Providing appropriate data to the Exceptional Children Division about the number of school age students served by NC DVRS, by disability, age, types of services provided and post-school employment outcome through annual reporting.
- Promoting the development of cooperative agreements between NC DVRS and local school administrative units that include the following components:
 - Roles of each agency;
 - Financial responsibilities;
 - Vocational Rehabilitation staffing and supervision by the NC DVRS;
 - Procedures for outreach, referral, liaison staff between the parties, eligibility, delivery of services, dispute resolutions, sharing of appropriate client information and student involvement;
 - Joint staff development and training;
 - Services to students with disabilities who are not receiving special education services;
 - Assurances of compliance with Individuals with Disabilities Education Act (P.L. 105-17), Carl Perkins Vocational and Applied Technology Act (P.L. 105-332), the Rehabilitation Act of 1973 as amended; and

- Along with the local educational agency, provide and implement an ongoing evaluation of the cooperative efforts with a formal annual review of the proposed budget and any necessary interagency agreement updates.

2. A description of Exceptional Children Division's responsibilities pertaining to this area

Through the formal interagency agreement in place, the Exceptional Children Division of the NC DPI has the following responsibilities with respect to the provision of technical assistance and consultation with local educational agencies:

- Provide technical assistance to local school administrative units to assure access for students with disabilities in appropriate Career and Technical Education Programs based on recommendations of the Individualized Education Program (IEP) Team.
- Assist local school administrative units in the planning, development and implementation of transition services for students with disabilities.
- Inform local school administrative units of services available from NC DVRS and promote referral generation.
- Promote the provision of psychological, vocational, therapeutic (e.g., speech-language, occupational and/or physical therapy services), assistive technology, and work adjustment services and educational assessment in collaboration with local educational agencies (i.e., school districts) for students with disabilities having an identified need.
- Promote the development of cooperative agreements between Vocational Rehabilitation Services and local school administrative units in keeping with 34 C.F.R. Section 361.38 Protection, Use, and Release of Personal Information.

3. A description of Career Technical Education Division's responsibilities pertaining to this area

Through the formal interagency agreement in place, the Career Technical Education Division of the NC DPI has the following responsibilities with respect to the provision of technical assistance and consultation with local educational agencies:

- Provide needed consultation to assure the initiation of cooperative career/technical education and internship programs for students with disabilities involved in local school administrative units and other state agencies.
- Provide consultative services to local school administrative units and other state agencies and institutions to assure initial placement and maintenance of eligible students with disabilities in Career and Technical Education Programs.
- Provide needed consultation to assure the initiation of cooperative career/technical education and internship programs for students with disabilities involved in local school administrative units and other state agencies.
- Provide consultative services to local school administrative units and other state agencies and institutions to assure initial placement and maintenance of eligible students with disabilities in Career and Technical Education Programs.
- Promote the provision of vocational/technical assessment services, career-decision making training, vocational instruction, and transition planning for students with disabilities in local school administrative units.
- Promote career/technical education counseling, cooperative work experience, internships and job placement of students with disabilities by local school administrative units.
- Assist local school administrative units in the planning, development, collection of data, and implementation of transition services for students with disabilities.

Part III. B. Transition planning by personnel of NC DVRS and the educational agencies that facilitates the development and completion of their individualized education programs

The interagency agreements between NC DVRS and the Education Agencies stipulate that transition planning for students with disabilities will be a cooperative effort. Furthermore, the agreements specifically require mutual participation of appropriate personnel in the development of the transition component of the Individualized Education Program and the Individualized Plan for Employment for students with disabilities. The sharing of Individual Education Plans (IEPs) and Individualized Plans for Employment (IPEs) at the local level is strongly encouraged. NC DVRS vocational rehabilitation counselors are required to review a student's transition component of the IEP and incorporate, as appropriate, a description of relevant objectives in the IPE. Furthermore, a comprehensive evaluation will be completed by the State agency on each eligible individual, to the degree necessary, to determine the vocational goal and scope of vocational rehabilitation services to be included in the IPE. The agreements state that the student with the disability is expected to fully participate in the development of the plan and any plan amendments. The agreements specify that the NC DVRS vocational rehabilitation counselors will provide the individuals with information sufficient to make an informed choice among alternative goals, objectives, services, entities providing such services and methods to procure such services. Additionally, the agreement requires that the vocational rehabilitation counselor is to review the IPE with the individual or his/her representative at least once each year.

Part III. C. Summary of roles and responsibilities, including provisions for determining and developing qualified personnel responsible for transition services

Summary of Roles and Responsibilities of NC DVRS under the agreements:

- Provide a program of vocational rehabilitation services to eligible individuals referred by the third party and to other individuals found eligible for services.
- Collaborative development of the transition component of the Individualized Education Program (IEP) and the Individualized Plan for Employment (IPE) for students with disabilities.
- Provide effective and appropriate supervision of the vocational rehabilitation activities and VR staff assigned to provide the services.
- Provide administrative and consultative support, in the area of its program responsibilities, to the local education agency.
- Share statistical and fiscal reports to other parties as deemed mutually necessary to ensure open communication and good administrative practices.
- As part of the agreement, NC DVRS Rehabilitation Counselors will provide individuals with information sufficient to make an informed choice among alternative goals, objectives, services, entities providing such services and methods to procure such services. The counselor is to review the IPE with the individual or his/her representative at least once each year. The VR counselor will provide each eligible individual an IPE Handbook wherein there is an appeals process outlined. Information pertaining to the Client Assistance Program (CAP) is included in the handbook. The VR counselor agrees not to close an individual's record as having achieved a successful employment outcome until the person exits school and is determined that the individual has successfully completed the IPE.
- Conduct an annual survey of students in the school system.
- The vocational rehabilitation counselor will place major emphasis on students who are juniors, seniors, or potential dropouts.
- Screen referrals from other sources within the school system to enable students with disabilities who do not have an Individual Educational Plan (IEP) to be considered for vocational rehabilitation services.

- Mutually agree to utilize appropriate staff development personnel in the planning and implementation of joint inter-disciplinary team training and/or staff development for purposes of effectively providing transitional services to students with disabilities.
- Liaison personnel appropriate and qualified for the provision of transitional services, recommending needed changes and implementing the agreement will be appointed by the administrative units of the parties named in the agreement with the educational agencies.

Part III. D. Summary of financial responsibilities of each agency

The interagency agreements between NC DVRS and Education Agencies including the NC Department of Public Instruction and Local Educational Agencies/School Boards stipulate the financial responsibilities of each party. Financial responsibilities of respective parties are described in more detail within the agreements between NC DVRS and the LEA's, since this satisfactorily addresses the need. Summary of financial responsibilities of NC DVRS under the agreements:

- Provide Federal funding in the amount of 78.7% of the agreed-upon annual budget depending on the availability of Federal funds and the program arrangements.
- Maintain accounts and supporting documents that will permit an accurate determination at any time of the status of State and Federal participation of expenditures incurred in operation of the rehabilitation program.
- Assume responsibility, within the limitation of resources, for the cost of services included in the student's Individualized Plan for Employment (IPE) according to NC DVRS' established policies and fee schedule.
- Within the limitations of available resources, provide case service funds necessary to the delivery of vocational rehabilitation services
- Accept financial responsibility for the cost of NC DVRS' portion of cooperative training efforts and maintain proper accounts and records of these activities. Summary of financial responsibilities of the Educational Agency partners under the agreements:
- Parties entering into an agreement contribute to NC DVRS an annual cash amount of 21.3% of the agreed-upon annual budget. Whereas NC DVRS must provide funds equal to the State's share of planned expenditures as specified in the Federal Act. The local per centum match funds are to consist totally of non-Federal funds that have not or will not be used to match Federal funds other than Federal Vocational Rehabilitation funds used in this program.
- Any contribution of funds is made available for expenditure at the sole discretion of the NC DVRS. It is understood that such funds must be spent for rehabilitation services and for the administration of those services; that expenditures must be made under the approved agency State plan; and that expenditures must be made under the control and supervision of the NC DVRS.
- Provide all individuals determined eligible for vocational rehabilitation services with those services that are its legal and traditional responsibility, e.g., assistive technology required and included in an individual's IEP, without cost to the NC DVRS. The cooperative program is utilized to provide services which represent new services or new patterns of services when compared to existing services.
- Provide and maintain adequate facilities and office space that is accessible to both staff and individuals with disabilities, private for individual counseling, with conditions that are conducive to confidentiality and counseling.
- Accept financial responsibility for the cost of their party's portion of cooperative training efforts and maintain proper accounts and records of these activities.

Part III. E. Procedures for outreach to and identification of students with disabilities who need transition services

NC DVRS ensures that students with disabilities who are not receiving special education services have access to and can receive vocational rehabilitation services, if appropriate, by ensuring outreach to and identification of these students. Outreach to these students occur as early as possible during the transition planning process and must include, at a minimum, a description of the purpose of the vocational rehabilitation program, eligibility requirements, application procedures, and scope of services that may be provided to eligible individuals. NC DVRS vocational rehabilitation counselors are required to contact persons in the schools responsible for coordinating services to students under the Individuals with Disabilities Education Act (IDEA) and 504 plans and are instructed to conduct high school surveys in order to identify eligible students with disabilities. The Program Specialist for Transition Services has put forth effort at the state level to formulate relationships with pertinent staff with NC DPI to ensure strong working knowledge of NC DVRS and to encourage staff development programs to include a VR component. The importance of completing outreach to students through non-traditional means to identify students is emphasized in the Division's casework policy. Furthermore, in order to generate appropriate referrals, NC DVRS counseling staff members are encouraged to contact other resource personnel within the local schools including social workers, school nurses, occupational, physical and speech therapists. One of the primary goals of the Division's provision of transition services is to work with youth with disabilities who are at risk of dropping out of school or who are age 16. Students who have a definite need for services may be served earlier than that age. There are differences in available staff and in numbers of youth with disabilities in school systems, which impact the attainment of this goal. However, the counselor makes individual eligibility decisions for persons referred to NC DVRS by schools and serves them in keeping with the above goal. Factors to consider for "potential dropout" referrals include: (a) verbal indications by the student of intent to leave school, (b) students with disabilities failing half of course work, and (c) students in danger of not receiving course credits due to excessive absences.

Part IV: Other Evidence and Historical Information on Collaboration with Education Officials

Since 2003, the Division's Transition Specialist and a school counselor have served together with NC Department of Public Instruction representatives and others to form a statewide capacity building team to develop and provide coordinated transition activities for students with disabilities to achieve better results with post-school outcomes, including obtaining employment or attending post-secondary education. The Division's vocational rehabilitation staff participates in an annual Exceptional Children's Conference and regularly scheduled cross training regarding the provision of services at the local level. Specialized cooperative training activities, workshops and conferences have existed over the years and will continue to occur periodically, including both Vocational Rehabilitation staff and educators in conjunction with the requirements of the state's Comprehensive Plan. The Division also increased its efforts to provide Supported Employment services to facilitate transition more effectively. Furthermore, the Division included an emphasis on providing available support services during high school and developed a statewide budget for Community-Based Assessment, in order to expand this opportunity for students. This service supports all pathways to achieve a high school diploma. The Occupational Course of Study enables students with significant disabilities to partially fulfill the requirements for a high school diploma through work experience. NC DVRS has developed the use of paid internships to assist in this requirement. Every year the Division participates in the North Carolina Exceptional Children's Conference along with county school systems and the NC Department of Public Instruction.

During federal fiscal year 2012, the Team for State Capacity Building: Secondary Education and Transition Services completed the annual review and update of the Transition Plan for North Carolina. The plan and team is directed by the tool provided by the National Secondary Transition Technical Assistance Center (NSTTAC) to establish and enhance transition services to states. Currently, this team is developing a transition toolkit for teachers and anticipates the development of toolkits for parents and students, as well as agencies.

NC DVRS remains active with several organizations serving transitioning youth. With a regular presence on our State Transition Team, NC Youth Collaborative, Post-Secondary Education Alliance, and NC Division of Career Development and Transition, NC DVRS is well represented in our state. The NC DVRS

VR Program is partnering with NC Assistive Technology Project (NCATP) to develop training for our transition staff as well as regular interviews with our NC DPI partners to share information. Our Program Specialist for Transition Services has provided extensive outreach to our transition counselors and provides in service training as requested to ensure consistency, encourage creativity in service delivery, and to provide updated information. In anticipation of the upcoming year, NC DVRS is excited to see outcomes from three pilot programs that target a traditionally underserved, most significantly disabled population. With two Project Search Pilot Programs in their second year, we are hopeful that positive employment outcomes will lay the ground work for the expansion of Project Search in our state. Our third pilot project involves post-secondary education for individuals with developmental disabilities. NC DVRS has worked closely with the development of this program to ensure strong vocational components are built into the two-year certificate program. NC DVRS supports the development of two unique skills training programs that are regionally relevant to the labor market, including a gluten-free bakery in the western part of our state and a construction training facility. Both programs target transition-age youth with disabilities.

We look forward to our continued collaboration with NC DPI and the development of stronger relationships with Career and Technical Educators as well as other ancillary staff in our local schools to ensure we are reaching a broader range of students and offering the opportunity to explore services through NC DVRS.

Attachment 4.8(b)(3) Cooperative Agreements with Private Nonprofit Organizations

Describe the manner in which the designated state agency establishes cooperative agreements with private non-profit vocational rehabilitation service providers.

Division's Response

Private non-profit providers of rehabilitation services are necessary and valuable partners in the delivery of the array of services needed by the individuals eligible for VR services within the state. The Division routinely seeks out such partnerships especially in geographic areas where additional services and/or service provider choices need to be established. The NC Division of Vocational Rehabilitation Services (NC DVRS) establishes and maintains contracts or agreements with over 120 non-profit vocational rehabilitation service providers providing an array of services to the Division's consumers. Fifty six (56) private-non-profit vocational rehabilitation service providers have established performance-based contracts with the Division, where the organizations are administered funds when an individual receiving services within their program has achieved designated goals or "milestones" on their way toward their ultimate goal of competitive employment. During federal fiscal year 2014 services provided through Community Rehabilitation Programs were transitioned from a "fee for services" payment system to a "milestone" payment system. Details of this system and its implementation were developed in collaboration with the Community Rehabilitation provider community through representation via the CRP-DVRS steering subcommittee and through feedback solicitations made via web-based feedback mechanisms.

Presently, the Division has established four (4) contracts with private non-profit service providers providing transitional employment services for the Division's consumers who are transitioning from facility-based settings to community-based settings; and in federal fiscal year 2015 there will be three (3) due to one of the contracts not being renewed. A private non-profit service provider can enter into an agreement or contract with the Division once it has gone through the Division's vendor approval process, by which a candidate service provider demonstrates its ability to provide services that meet established standards while fully compliant with all applicable state and Federal requirements. Site reviews are conducted to assure that programs and services are accessible to individuals served by the Division. Service rates are based largely on program costs, rates that have been established through researching regional market rates, or through competitive processes. Contracts are implemented through the Division's Center of Excellence Committee (COE), which is a committee established by the NC Department of Health and Human Services Office of Procurement and Contract Services. The committee's purpose is to identify and approve program needs, produce clear meaningful data, identify and approve outcomes, train and assist division/office program staff regarding the contractual procurement of services and reassessment of contract services. The COE includes senior management (director, section chiefs, budget officer) support and involvement. In addition to senior management, the COE includes subject matter experts in contracting, budgeting, programming, policy-making, and technology as applicable. The COE provides continuity to maintain a knowledge base about programs that can include evaluations of several contract services over long periods of time. This approach shifts the focus from contract processing to program management, ensuring that the scope of work for the service provider is tied to results.

Collaboration with the Lumbee Tribe and Eastern Band of Cherokee Indians

During federal fiscal year 2008, both the Lumbee Tribe and Eastern Band of Cherokee Indians became recipients of RSA's American Indian Vocational Rehabilitation Services (AIVRS) discretionary grants.

Lumbee Tribal Vocational Rehabilitation Program

Following an appointment during federal fiscal year 2009, the program director for the Lumbee Tribal Vocational Rehabilitation program (LTVRS) has been a participating member of the State Rehabilitation Council and has regularly attended quarterly meetings. The majority of the collaborative activity between LTVRS and the Division has occurred in the south central geographical region of the state, where the tribe is established. NC DVRS managers located within that region and LTVRS staff developed strategies for interagency referral and information sharing that assists with eligibility determinations and the development of individualized plans for employment for individuals within the covered population.

Referrals are regularly made between both agencies. In order to strengthen and clarify the procedures and expectations of both agencies relating to casework, resource, and training collaboration, an interagency agreement was developed and implemented on September 28, 2009.

Eastern Band of Cherokee Indians

Much of the collaboration between the Eastern Band of Cherokee Tribe and the Division occurs through Vocational Opportunities of Cherokee, Inc., the community rehabilitation program that provides vocational evaluation, work adjustment, and other vocationally-oriented training services for individuals with disabilities who reside on their reservation. The Division does have a contract in place with Vocational Opportunities of Cherokee, Inc. (VOCI) for the purchase of these services when it is appropriate for NC DVRS clients who are not formally affiliated with the tribe. The Division does have one or two rehabilitation counselors that serve as liaisons with the tribe and VOCI which helps maintain communication channels. Historically, NC DVRS has worked closely with the vocational rehabilitation programs of the Eastern Band of Cherokee Indians to effectively meet the vocational rehabilitation needs of eligible individuals in their service area through a collaborative relationship. The Division and the Eastern Band of Cherokee Indians updated their memorandum of agreement October 19, 2009.

Attachment 4.8(b)(4) Arrangements and Cooperative Agreements for the Provision of Supported Employment Services

Describe the efforts of the designated state agency to identify and make arrangements, including entering into cooperative agreements, with other state agencies and other appropriate entities in order to provide the following services to individuals with the most significant disabilities:

- supported employment services; and
- extended services.

Division's Response

The North Carolina Division of Vocational Services (NC DVRS) has renewed a cooperative agreement with NC Division of Mental Health, Developmental Disabilities, and Substance Abuse Services (DMHDDSA) to assure that individuals with the most significant disabilities have equal access to vocational rehabilitation and best practice employment services. The relationship between the two divisions has been enhanced over the past several years through changes in personnel at DMHDDSA as well as a change in their focus towards employment as a goal for consumers.

The NC Department of Health and Human Services reached an agreement with the US Department of Justice to address the needs of persons with disabilities living in adult care homes. With this agreement came a resolve to address the needs of those who would like to live independently within their community versus an institutional setting. The agreement called for evidence-based practices to be used. NC DVRS and DMHDDSA are partnering together to implement the Individual Placement and Support (IPS) model of supported employment in this state. Four research pilot sites are located throughout the state with more to come in the following years. This model of supported employment (SE) is also known as the Individual Placement and Support Model (IPS). Representatives from NC DVRS, Division of Medical Assistance (DMA), and DMHDDSA went to New Hampshire and were trained in this model. This year, the state's IPS team leaders will attend the annual meeting of the Johnson & Johnson Dartmouth Meeting in Kentucky, along with representatives from the other 15 states and three international countries, to learn more about and discuss implementation of the IPS model of SE. Also, DMHDDSA has developed a state definition for supported employment and long term vocational support using the IPS model of SE. North Carolina's definition calls for the inclusion of Peer Support Services as a mandatory service available to individuals with services paid through funds from the LME/MCO. Through this definition, if an individual with disabilities chooses NC DVRS as their supported employment provider and the person is served through the Local Management Entity/Managed Care Organization (LME/MCO) system, they will be able to receive long term vocational supports (LTVS). Each VR office will have a liaison specifically for those CRP agencies providing IPS model of SE.

Through long term collaborative efforts between NC DVRS and the community rehabilitation program (CRP) providers developing ways in which consumers can be better served through supported employment, the new managed care organizations in the state, the LME/MCOs, will have a dedicated and experienced system of providers to rely on as this state moves forward in developing and funding employment services within the state.

Another partnership NCDVRS has with DMHDDSA is educating the LME/MCO, VR field staff, and IPS contracted providers concerning the IPS model of supported employment (SE). Representatives from both NC DVRS and DMHDDSA are assisting with education and collaboration among all entities to help with implementation throughout the state. LME/MCO systems have increased the number of contracted SE providers as this model becomes more familiar and systems change to include this model.

The established CRP-NC DVRS steering committee continues to review the provision of supported employment services in North Carolina to ensure that funding is optimally utilized so that adequate funding will be available for ongoing extended services. The steering committee continues to address the issues that surround long term support funding such as inconsistencies in the levels of disability-type funding and shortages as well as looks at other best practices that can be incorporated into the NC service delivery system. Further, NC DVRS partners with DMHDDSA to utilize the expertise of national experts through the State Employment Leadership Network (SELN) a project funded through the NC DD Council. The SELN provides technical assistance to implement best practices for employment and

systems change where necessary to maximize resources for services. Most recently, NCDVRS has partnered with DMHDDSA and DMA on a workgroup through the Employment First Leadership State Mentoring Program with the mission of developing ways to infuse integrated employment into Medicaid Waivers and State Plan Medicaid Options. This is a national effort through the U.S. Department of Labor, Office of Disability Employment Policy (ODEP) to promote the alignment of policies, regulatory guidance, and reimbursement structures to commit to integrated employment as the priority option with respect to the use of publicly financed day and employment services to youth and adults with significant disabilities.

NC MHDDSA has also written into the SE definition the provision for Peer Support Services. VR consumers receiving the IPS model of SE will receive peer support services. Also, NC MHDDSA has written a stand-alone service definition for peer support services to be paid for through the B3 Waiver of Medicaid and is awaiting final authorization from the Division of Medical Assistance. LME/MCOs can also utilize state dollars to pay for peer support services as part of their array of services. This has opened up an opportunity for NC DVRS to look at authorizing this service for our clients who are not served through the LME/MCO system. Therefore, NC DVRS has formed a committee to write a division-specific service definition, policy, and procedures for peer support services. NC DVRS is also looking into alternative ways such as grants or other collaborative approaches to fund these services other than through case service dollars.

The Division's Program Specialist for Statewide Community Rehabilitation Programs and six (6) Regional Community Rehabilitation Specialists provide oversight for CRP's to verify that supported employment services provided by the Division will include a transition period in which extended services will be provided jointly by NC DVRS to assess the individual's performance within their job choice and their individual adjustment and success in their position. This time allows any observed issues to be resolved and an extension of the stabilization phase if necessary.

The continued growth of the statewide network of supported employment service providers has resulted from collaboration between the Division of Vocational Rehabilitation Services and entities such as the North Carolina Association of Rehabilitation Facilities, the North Carolina International Association of Psychosocial Rehabilitation Services, the NC Developmental Disabilities Council and the Mental Health Consumers' Organization. In addition, the North Carolina Association for Persons Supporting Employment First (NCAPSE) provides a forum for focusing on supported employment standards and expanded choices for individuals with the most significant disabilities in the state.

The North Carolina Association of Rehabilitation Facilities (NCARF) and the North Carolina Association for People Supporting Employment First (NCAPSE) have been heavily involved in the continued development of supported employment services, specifically for persons with intellectual and developmental disabilities. NC DVRS, NCARF, and NCAPSE have collaborated on training events and the development of new supported employment programs across the state as well as new service models. Community rehabilitation programs, which include facility-based and free-standing programs, provide the majority of supported employment services for persons with the most significant disabilities. New community-based options are expanding through collaboration with the community college system, the Post-Secondary Education Alliance, the NC DMHDDSA, and with the addition of contracting private providers. Brain Injury Support Services continue to operate within the state in Goldsboro, Greenville, Winston Salem, Raleigh, and Charlotte areas with an interest in expanding to underserved areas of the state. NC DVRS has recently released a Request for Applications to solicit proposals from providers to provide brain injury services, particularly in areas of the state that are underserved. Selected providers are in negotiations to modify existing models for brain injury services with NC DVRS and will add at least one additional location for the next federal fiscal year that is currently not served. In addition, transitional employment continues to be an option for psychological rehabilitation (PSR) programs to provide if the PSR program is certified through the International Center for Clubhouse Development (ICCD). Options are being explored to expand the transitional employment service to community rehabilitation programs that do not have ICCD certification.

The North Carolina Developmental Disabilities Council has sponsored funding for several new initiatives entitled *Reaching for the Summit of Success*, *Emergency Preparedness for Individuals with Intellectual and Developmental Disabilities*, and *Learning and Earning After High School*, all of which the NC DVRS will or has been a collaborative partner. The NC Developmental Disabilities Council awarded the Summit

of Success grant to the Institute for Community Inclusion (ICI), University of Massachusetts to expand employment opportunities around the state and incorporate stakeholders' input through regional summits. Summits have been held in Charlotte, Raleigh and Wilmington in 2014, and a conference is in the final planning stages.

Finally, the Division's Employment and Program Development Section has continued to represent NC DVRS with active membership in several statewide advisory boards, including on the NC Brain Injury Statewide Advisory Council and the Mental Health Planning Council. Established through legislative mandate in the 2003 General Assembly, the NC Brain Injury Advisory Council's mission is to review the current definition of traumatic brain injuries, promote interagency collaboration among state agencies serving this population, study the needs of persons with traumatic brain injuries and their families, make recommendations regarding a comprehensive service system for this population, and promote and implement injury prevention strategies across the state. The Mental Health Planning Council meets quarterly to review the annual Mental Health Block Grant Plan and to submit to the state any recommendations of the Council for modifications to the plans. The Planning Council also serves as an advocate for adults with a serious mental illness, children with a severe emotional disturbance, and other individuals with mental illnesses or emotional problems; and monitors, reviews, and evaluates the adequacy of mental health services within the state.

In addition, the Division of Vocational Rehabilitation represents the agency on the "Governor's Focus on Service Members, Veterans, and their Families," a collaborative monthly meeting that serves as a resource clearinghouse for addressing issues of returning veterans from Iraq and Afghanistan and other service members. In addition, as an offshoot of this group, the Division participates in a Statewide Advisory Committee for Operation Recovery, a five-year SAMHSA-funded pilot project in the Charlotte/Mecklenburg County area of NC. The purpose of this pilot is to create a comprehensive, trauma-integrated jail diversion and support system for US military service veterans. Outreach efforts between NC DVRS, the Veterans Administration, and other military operations have occurred to ensure that veterans and their family members are aware of services available to them through the NC DVRS.

Throughout 2013, the NC DVRS and Veterans Administration's Vocational Rehabilitation Program have been negotiating a Memorandum of Agreement to maximize mutual services for Veterans and assure a more streamlined referrals process between the two agencies. This agreement was finalized during FFY 2014.

Attachment 4.10 Comprehensive System of Personnel Development

Data System on Personnel and Personnel Development

Part I. Personnel and Vacancy Projections

Describe the development and maintenance of a system for collecting and analyzing on an annual basis data on qualified personnel needs with respect to:

- the number of personnel who are employed by the state agency in the provision of vocational rehabilitation services in relation to the number of individuals served, broken down by personnel category;
- the number of personnel currently needed by the state agency to provide vocational rehabilitation services, broken down by personnel category; and
- projections of the number of personnel, broken down by personnel category, who will be needed by the state agency to provide vocational rehabilitation services in the state in 5 years based on projections of the number of individuals to be served, including individuals with significant disabilities, the number of personnel expected to retire or leave the field, and other relevant factors.

Division's Response

The North Carolina Division of Vocational Rehabilitation Services utilizes a personnel system called Building Enterprise Access for North Carolina's Core Operations (BEACON). Reports pertaining to the State Plan are customized to provide updated information. The Division's Staff Development section also maintains a comprehensive database on all staff in trainee positions working toward a Master's Degree in Rehabilitation Counseling. This database includes information on the specific degree and progress toward meeting those requirements.

The table below lists all Counselors, and staff in support of these Counselors. An analysis of these 658 positions was completed, with respect to current vacancies and the projected vacancy rate over the next 5 years. Division experienced a 16% turnover in the Rehabilitation Counselor I positions and a 10% turnover rate in Rehabilitation Counselor II positions. The tables immediately below show an average for the past 3 years of actual data and the total number of expected vacancies based on the number of actual vacancies since April 2008.

Table 4.10.1. Rehabilitation Counselor Positions and Vacancies

Job Title	Total positions	4/1/11-3/31/12 Vacancies	4/1/12-3/31/13 Vacancies	4/1/13-3/31/14 Vacancies	Average 3 Year Rate	Total Expected Vacancies for 5 years*
Rehabilitation Counselor I	197	28	30	29	29	147
Rehabilitation Counselor II	134	7	11	18	12	61

* Total expected vacancies are projected from the actual number of vacancies from 4/2008 – 3/2013.

Table 4.10.2. Rehabilitation Services Positions and Vacancies

Job Title	Total Positions	Current Vacancies	Total Projected Vacancies Over the Next 5 Years*
Rehabilitation Counselor I	197	30	147
Rehabilitation Counselor II	134	18	61
Counselor-in-Charge	57	5	26
Rehabilitation Administrative Counselor I	3	0	1
Rehabilitation Administrative Counselor II	14	0	1
Rehabilitation Administrative Counselor III	14	0	2
Vocational Evaluator II	45	8	27
Human Resources Placement Specialist	65	12	30
Human Services Coordinator	16	2	8
Rehabilitation Casework Technician	113	12	38

* Total expected vacancies are projected from the actual number of vacancies from 4/2008 – 3/2013.

Part II. Higher Education for Preparing VR Professionals

Describe the development and maintenance of a system for collecting and analyzing on an annual basis data on personnel development with respect to:

- a list of the institutions of higher education in the state that are preparing vocational rehabilitation professionals, by type of program;
- the number of students enrolled at each of those institutions, broken down by type of program; and
- the number of students who graduated during the prior year from each of those institutions with certification or licensure, or with the credentials for certification or licensure, broken down by the personnel category for which they have received, or have the credentials to receive, certification or licensure.

Division's Response

The Division closely works with all of North Carolina's Rehabilitation Counseling university programs of study through advisory board participation, internships, the Recruitment and Retention Committee, and partnerships in conferences and trainings. The chart below includes information obtained from each Rehabilitation Counseling university program, as well as from the Staff Development section's database.

Table 4.10.3. Institutions and Type of Program, Students Enrolled in the Program, Total Number of Students Graduating During Prior Year with Certification or Certification for Licensure, and Number Employed by VR & Their Corresponding Personnel Categories

	Students Enrolled	Total Graduates from prior year w/ credentials	NC DVRS Hired/ Personnel Category
NC A & T Technical State Univ.- Human Resources Rehab Counseling Master's Program.	108	88	8
East Carolina University-Rehab. Counseling Master's Program	24	8	2
East Carolina University-Vocational Evaluation Master's Program	18	18	2
East Carolina University Substance Abuse Counseling Program	61	32	0
Winston Salem State Univ.- Rehab. Counseling Master's Program	62	16	11
University of NC-Chapel Hill -Rehab. Counseling & Psychology Master's Program	40	15	1
Total	313	177	24

Table 4.10.4. Institutions and NC DVRS Employees Enrolled, Sponsored by NC DVRS and/or RSA, Graduates Sponsored by NC DVRS and/or RSA and Graduates from the Previous Year

Institutions	Students enrolled	Employees sponsored by NC DVRS and/or RSA	Graduates sponsored by NC DVRS and/or RSA	Graduates from the previous year
NC Agricultural & Technical State University	1	1	0	0
East Carolina University	1	1	1	1
Winston-Salem State University	1	1	0	0
University of North Texas	2	2	1	0
Auburn University	2	2	1	0
Total	7	7	3	1

Part III. Plan for Recruitment, Preparation and Retention of Qualified Personnel

Describe the development (updated on an annual basis) and implementation of a plan to address the current and projected needs for qualified personnel including, the Coordination and facilitation of efforts between the designated state unit and institutions of higher education and professional associations to recruit, prepare, and retain personnel who are qualified, including personnel from minority backgrounds and personnel who are individuals with disabilities.

Division's Response

The Division implemented a paid internship program in January of 2005. This program was coordinated from our Staff Development section with the support of management, Human Resources, and counselors across North Carolina. Due to budget restrictions, this program became an unpaid internship program. This change in the program did have impact in the initial involvement of students, but participation is improving overall. The benefit of hiring interns into vacant positions is that we have a sense of the person's strengths and weaknesses prior to being hired. The 24-month probationary period that every new employee undergoes does allow the Division better assess a proper job match. If the person is not successful during this time, the person is released from the job during probationary status. This is not viewed the same as a dismissal. It is considered an extension of the hiring process and not disciplinary action. A majority of our interns hired by NC DVRS have been from the two Historically Black Universities in our state; NC Agricultural & Technical State University and Winston-Salem State University.

Division personnel participate in the university Rehabilitation Counseling program advisory boards within the state. The type of personnel representing NC DVRS within these advisory boards varies; however the Division is well represented and our role well respected within these programs. Our partnerships with these institutions are fortified through our staff enrolled in many of these programs, which include the historically black schools. Further, the unit offices are encouraged to participate in partnering local career fairs at the partnering universities and colleges. Marketing displays and brochures have been provided to every unit office so that marketing materials remain available for the unit offices' activities.

A broader perspective on retention includes a comprehensive, timely and effective onboarding/orientation program that is in progress. The Division recognizes that getting off to the right start can make the difference in retaining an employee. A comprehensive overview of the Division—its mission, staff, organizational structure, processes and relevant information—can ensure a good start. The Staff Development section is working with an advisory board that includes different job classifications throughout the agency to structure an onboarding program that will be effective for all levels of employees. The program will not begin with the first day of employment; it will begin as part of the hiring process and will extend throughout the career of each employee. An onboarding program helps a person feel that the agency is prepared to help new employees gain information necessary for their job at the right time. The intent is not to flood a new employee with so much information that it becomes useless. The program will be presented largely in an on-line tutorial or distance learning format, enabling employees to be at different places within the process at one time.

Part IV. Personnel Standards

Describe the state agency's policies and procedures for the establishment and maintenance of personnel standards to ensure that designated state unit professional and paraprofessional personnel are adequately trained and prepared, including:

- (a) standards that are consistent with any national or state approved or state recognized certification, licensing, registration, or, in the absence of these requirements, other comparable requirements (including state personnel requirements) that apply to the profession or discipline in which such personnel are providing vocational rehabilitation services; and
- (b) to the extent that existing standards are not based on the highest requirements in the state applicable to a particular profession or discipline, the steps the state is currently taking and the steps the State Plans to take in accordance with the written plan to retrain or hire personnel within the designated state unit to meet standards that are based on the highest requirements in the state, including measures to notify designated state unit personnel, institutions of higher education, and other public agencies of these steps and the timelines for taking each step. Be sure to include the following:
 - 1. specific strategies for retraining, recruiting, and hiring personnel;
 - 2. the specific time period by which all state unit personnel will meet the standards;
 - 3. procedures for evaluating the designated state unit's progress in hiring or retraining personnel to meet applicable personnel standards within the established time period;

4. the identification of initial minimum qualifications that the designated state unit will require of newly hired personnel when the state unit is unable to hire new personnel who meet the established personnel standards;
5. the identification of a plan for training newly hired personnel who do not meet the established standards to meet the applicable standards within the time period established for all state unit personnel to meet the established personnel standards.

Division's Response

While NC DVRS modeled its counselor personnel standard after the CRCC, the Division initiated its own comprehensive standard with more specific listing of degrees that it will accept. Effective October 1, 2008, this standard-related requirement for a Rehabilitation Counselor hire includes:

- Master's degree in Rehabilitation Counseling;
- Master's degree in a closely related field such as Counseling, Social Work, Psychology, Special Education, Communication Disorders, Human Services;
- Current certification as a Certified Rehabilitation Counselor or Licensed Professional Counselor;
- Current enrollment in a qualifying master's degree program AND graduation occurs prior to the date of hire.

As of December 21, 2009, all individuals in the Rehabilitation Counselor I and Rehabilitation Counselor II roles met the current CSPD mandate. Currently, we have 1 employee who is considered a Rehabilitation Counselor Trainee. Employees in trainee status do not function as a Rehabilitation Counselor, but are required to progress toward attaining the necessary requirements outlined in a Memorandum of Agreement within the specified timeframe. If the employee does not meet the specified requirements or they are not progressing at an acceptable rate, the employee will be separated during their probationary status period.

As of March, 2014, the Division had the following number of employees of which all meet the Division's CSPD requirements with the exception of trainees, who are making progress toward an approved Master's degree:

- Rehabilitation Counselor Trainees: 1
- Rehabilitation Counselor I: 164
- Rehabilitation Counselor II: 118
- Counselors-In-Charge: 57

The chart listed below shows the change in the past year in relationship to turnover in the Rehabilitation Counseling positions. The most significant change is noted in the position of Rehabilitation Counselor II. The Division feels this reduction is in relationship to the current budget situation within the state.

Table 4.10.5. Change in Rehabilitation Counselor Turnover Rate

Position	2013	2014	Difference
Rehabilitation Counselor I	17%	16%	-1%
Rehabilitation Counselor II	9%	10%	1%

NC DVRS currently averages around 10 qualified applicants for each vacancy, which is primarily attributable to the current economic climate. This means that recruitment for RC I and RC II positions have not been as challenging as in years past. The Division does find it more challenging to find individuals prepared to serve a Deaf and Hard of Hearing caseload, but these vacancies have not been impossible to fill.

Part V. Staff Development

Describe the state agency's policies, procedures, and activities to ensure that all personnel employed by the designated state unit receive appropriate and adequate training in terms of:

- (a) a system of staff development for professionals and paraprofessionals within the designated state unit, particularly with respect to assessment, vocational counseling, job placement, and rehabilitation technology; and
- (b) procedures for the acquisition and dissemination to designated state unit professionals and paraprofessionals significant knowledge from research and other sources.

Division's Response

The Division continues to put forth a concerted effort to train staff in job development and placement. During 2013 an additional staff participated in the in a comprehensive Dual Customer Approach training initiative. Training sessions were made available to all new hires without wait lists or alternates. Now that everyone across the state has received the training during the initial Dual Customer Approach training, the number of participants is dropping. That participation reflects the number of new hires. This training provides meaningful techniques to assist all employees that work with a VR Unit Office to assist in the process of developing relationships with employers. The strategy has had great success in increasing successful employment outcomes. The premise is that for job development and placement to be successful, the Division must consider the needs of both the consumer and employer. Additional training opportunities occurred for 60 NC DVRS staff during the past year in relation to job development by attending the 2012 Workforce Development Conference.

The Division also places emphasis on vocational assessments. This is reflective in its maintenance of 45 Vocational Evaluators and 3 Vocational Evaluation Specialists. As a result, the Division does not typically utilize contractual services for assessing consumers. We also strive to provide excellent training for those serving in the vocational evaluator positions. Each year, the Staff Development Department supports participating in East Carolina University's Evaluator Summer Institute. However, as of the summer of 2012, the ECU Vocational Evaluation Program was discontinued. The Human Resources Director, Assistant Human Resources Director and two Rehabilitation Specialists met with the primary instructor for the Summer Institute to develop a program that would provide ongoing education for the current Vocational Evaluators and Vocational Evaluation Specialist. Since this meeting, ECU developed on-line replacement courses, which preserve the content of the course material, except for the hands-on experience with assessments.

Another professional development program that is available to all VR and IL staff members who provide evaluations, assistive technology equipment, and assistive technology services for the consumers they are serving is the NC Assistive Technology Program (NCATP). NCATP has twenty staff serving the state of North Carolina, which includes the Director, Funding Specialist, AT Information and Referral Specialist, Intake Coordinator, two Processing Assistants, four Speech Language Pathologists (SLP) and ten Assistive Technology Consultants. The ten AT Consultants and 4 SLPs provide direct one-on-one services in the AT Centers. Their annual Assistive Technology Expo is regularly attended by Division staff, but was recently canceled two years ago due program budget limitations. However, during 2012 the NCATP Expo was combined with the North Carolina Rehabilitation Association for "*The GreAT Conference*". The resulting conference was well attended and supported by the North Carolina Division of Vocational Rehabilitation Services. Feedback from attendees was positive regarding the value of the conference and the collaboration between both organizations.

The 2012 North Carolina Rehabilitation Association Conference and NCATP Expo called "*The GreAT Conference*" hosted 374 participants and an additional 30 students participating in poster sessions. North Carolina Vocational Rehabilitation and Independent Living program staff represented 196 out of 374 of those attending. Staff benefit from the networking and learning that occurs at this annual conference. Various topics such as ethics for rehabilitation staff, effectively serving specialty populations, and assistive technology solution updates are featured at these training events.

The Division continues the use of the Bulletin Board on its Intranet for the dissemination of information between staff. General information pertaining to conferences, trainings, research, articles, and relevant rehabilitation information is shared there. Different forums also exist on this Bulletin Board for discussion

among staff in specific positions; such as for counselors, vocational evaluators, business relations representatives, and other professionals.

The Division sponsored the attendance of 419 staff in conferences this past fiscal year. These conferences included the NC Summer and Winter School for Alcohol and Drug Studies, ECU Summer Vocational Evaluator Institute, Autism Society Conference, Spring Transition Conference, NCAPSE Annual Conference, NC Workforce Development Conference, NC Exceptional Children's Conference and the already mentioned, the collaboration of NCRA and NCATP Expo conference called *"The GreAT Conference"*.

Other Individual training requests included: "Everything You Wanted to Know About Drugs, But Were Afraid to Ask"; "Rehabilitation of Racial and Ethnic Minorities with Behavioral Addictions"; "Vocational Evaluators Work Adjustment Association"; "Substance Abuse & Personality Disorders"; "Mental Health Ethics Training"; "Addictions Training"; "NC Business Leadership Network"; "Navigate"; "Dementia Care"; "Co-Occurring Substance Abuse"; "Clinical Supervision Training"; "Former Offenders: Helping You Help Them"; "Depression and Suicide Among Elderly"; "Women of Color and HIV Community Forum"; "Customer Service Works: Addictions and Criminals"; "Helping and Mentoring"; ARC of North Carolina Conference; Autism-Asperger's Syndrome Training; 28th Annual Substance Abuse Services State of the Art; Way 2 Work Summit; NC Division of Career Development and Transition Training, and "Neurobiology and Addition."

"The Five Languages of Appreciation at Work" training was offered to all managers at the Statewide Manager's Meeting in May 2012. Currently, 22 unit offices have participated in the training. Customized trainings included: "Caseload Management"; "Time Management"; "Ethical Dilemmas" (a CRC ethics course); "Team Building," and "Generations at Work with the Team Approach."

Other initiative trainings that continue to occur yearly are: "Dual Customer Approach/Employment Outcomes Professionals"; "Performance Management for Supervisor" and six on-line health and safety trainings.

A major training initiative that will continue through during federal fiscal year 2013 is related to computer training and case automation. A total of 2,431 staff members statewide trained in BEAM, the Division's customized version of Libera System 7 electronic case management system. These were live sessions that included train-the-trainer sessions, followed by role-based training for users along with a subsequent session for new hires. Other computer training received by individuals included: "Articulate Expert Training"; Office 2010 training; "Get to Know Zebra Zapps: A Webinar Introducing Allen's Interactions Powerful New Authoring Tool"; "Compelling Content"; "Creating Engaging Learning," and the "Digital Government Summit."

Management Training

Ten (10) management trainings were provided to staff during the 2013 Federal Fiscal year. New managers received training in various courses including: "Performance Management Training for Supervisors"; "Equal Employment Opportunity Institute"; "Managing Effective Performance"; "Results-Based Interactions"; "Supporting Leadership Development"; "Leadership Facilitating Change"; "Drug-Free Workplace and Employee Assistance Program," and "Human Resources Skills." Additional attendance for the NC Office of State Personnel's Certified Public Manager's Program was offered for more experienced managers. Additional training will be provided at the Annual Statewide Manager's Meeting scheduled for September 2014.

Part VI. Personnel to Address Individual Communication Needs

Describe how the designated state unit has personnel or obtains the services of other individuals who are able to communicate in the native language of applicants or eligible individuals who have limited English speaking ability or in appropriate modes of communication with applicants or eligible individuals.

Division's Response

The Division's counselors have the responsibility for determining the individual's preferred language and providing a qualified foreign language interpreter/translator at the earliest possible opportunity, before or after the initial contact with the Division. This translation service is provided at no cost to the person with

Limited English Proficiency (LEP). A specific budget, 1292, is designated solely for the provision of this service. The interpreters/translators for all languages must be qualified and trained with demonstrated proficiency in both English and the native language of the client. The Membership Directory of the Carolina Association of Translators and Interpreters at <http://www.catiweb.org/> is presently used; however, it is not required that all qualified interpreters/translators be listed in this directory.

All fundamental VR and IL forms (44 currently) are available in Spanish for individuals with Limited English Proficiency (LEP). The Division's public website is also in Spanish for the section regarding VR Services to Consumers.

The Division has 14 counselors proficient in American Sign Language with caseloads specifically serving deaf and hard of hearing individuals. There are 10 technicians, 3 Business Relations Representatives, 2 Human Service Coordinators, a program specialist, and 2 Assistive Technology consultants for the deaf who support these counselors and the consumers being served. The Division has a Sign Language Interpreting Budget, 1294, designated solely for sign language interpreting. Approximately 15 interpreting agencies and over 125 independent licensed interpreters contract with the Division and are paid out of this budget. The Division acknowledges communication as a vitally important aspect of the rehabilitation process from start to culmination and remains committed to the provision of services that enable individuals who have specific communication needs to participate in their rehabilitation program. Further, these interpreting and translation services have been identified as essential for quality and success in the delivery of the Division's services.

Part VII. Coordination of Personnel Development Under the Individuals with Disabilities Education Improvement Act

Describe the procedures and activities to coordinate the designated state unit's comprehensive system of personnel development with personnel development under the Individuals with Disabilities Education Improvement Act.

Division's Response

North Carolina's Secondary Education and Transition Services team consisting of members from NC DVRS, NC Department of Public Instruction representatives, parents and university representatives, developed a state transition plan which includes a goal to accomplish a system of personnel development in support of the Individuals with Disabilities Education Improvement Act (IDEIA) and the Rehabilitation Act for collaboration to increase transition services to students with disabilities.

The NC Secondary Education and Transition Services planning team began a planning process during SFY 2011 with the purpose to execute the original transition training objective identified in the state plan. The purpose of the resulting Transition Capacity Building Summit is to replicate the state planning process at the local level which will facilitate training and team building for the local school systems and cooperative VR offices that attend. The training conference will be a combination of lecture sessions and group work activities, centered on building capacity for participating local community level transition teams to implement *transition-focused education*. Each team will be the local school system exceptional children's division transition staff and the cooperative VR office. The planning tool focuses on assisting state teams to review and plan their strategies for increasing capacity within their community. The framework of transition-focused education provides a structure for educational planning that is outcome-oriented and promotes greater involvement and ownership in the decision-making process by key stakeholders, particularly students and their families. The transition capacity building professional development training summit was completed February 24 -25, 2011. The NC Department of Public Instruction (NC DPI) was the major sponsor of local grants to the Local Educational Agency (LEAs) to attend the Transition Training Summit allowing 8 LEA teams to attend from across the state lead by the school system Exceptional Children's department. The 8 school systems from around the state received a grant to invite and sponsor local partners to participate in the local transition team. The Summit concentrated on Student-Focused Transition Planning through Interagency Collaboration. The 8 school systems selected by NC DPI were challenged to develop an action plan for improving the provision of transition services systemically in their school system and receive technical assistance as needed from the Exceptional Children's Division (ECD) to enhance and implement the LEAs Continuous Improvement Performance Plans (CIPP). NC DVRS was instrumental in planning and providing presenters for the

summit. The State planning team has a continuous goal to include other LEAs in additional summits. At any point that this planning summit is not available, serious consideration will be given to the re-instatement of the single-day Interagency Collaboration Sessions in local VR Units for continued collaboration and exchange of needs and services between NC DVRS and local school systems.

Attachment 4.11(a) Statewide Assessment

Provide an assessment of the rehabilitation needs of individuals with disabilities residing within the state, particularly the vocational rehabilitation services needs of:

- (a) individuals with most significant disabilities, including their need for supported employment services;
- (b) individuals with disabilities who are minorities;
- (c) individuals with disabilities who have been unserved or underserved by the vocational rehabilitation program; and
- (d) individuals with disabilities served through other components of the statewide workforce investment system.

Identify the need to establish, develop, or improve community rehabilitation programs within the state.

Division's Response

Data Collection for the Needs Assessment

To address the mandated requirements, the data collection and analysis portion of the CSNA focused on surveys with consumers and VR staff and other stakeholders. These data were supplemented with data on the demographics of people with disabilities, employment and labor statistics, other components of the North Carolina's workforce investment system, and community rehabilitation programs.

The survey data presented in this report includes two sets of surveys: one set of surveys was conducted from mid-August through mid-September 2013 specifically for the purpose of the CSNA. These surveys were sent electronically to VR consumers, VR staff members, and also to leaders of consumer advocacy groups and Workforce Development Board Directors, who served as key informants. The self-administered electronic questionnaire was delivered using the NC DHHS online survey data collection tool, called SurveyMax II. The survey responses, which were mostly free-text because the survey consisted mainly of open-ended questions, were first coded and analyzed using IBM SPSS Text Analytics for Surveys, with the results reviewed a second time for validation.

Other survey data incorporated into the CSNA report were collected for other program development, planning, and evaluation purposes that were applicable to the CSNA. These include (a) the results of our ongoing VR consumer satisfaction surveys and (b) the results from surveys of VR staff and Community Rehabilitation Programs (CRPs) conducted to address the need to establish, develop or improve community rehabilitation programs within the state through a change from an hourly-rate fee-for-service payment system to a milestone-based payment system. This section provides an overview of the surveys conducted specifically for the CSNA.

VR Consumer CSNA Survey

Approximately 5,000 VR Program consumers with active or recently closed cases and known email addresses received electronic surveys asking them to:

- (a) Identify their most important, second-most important, and third-most important VR needs for getting a job and keeping a job;
- (b) Rate the ability of the VR Program to help them with each of these needs; and
- (c) Let us know what they think the VR Program could do to help with each of these needs.

There were also questions for the VR consumer to let us know whether they were currently working and if there was anything else we could do to help them. In total, 867 VR consumers responded to the survey, of which 684 (79%) provided responses that identified one or more specific needs. The remaining 21% were responses indicating the client didn't know or didn't have any needs, or were off-target in that the response didn't address the question that was asked. The level of participation was comparable to that of the VR consumer satisfaction survey, and similarly self-selection and the ability to access an electronic survey resulted in respondents who were generally somewhat older, were more often women, were more

often not of a minority race or ethnicity, and were more often clients with physical disability or chronic medical condition rather than a cognitive or psychosocial disability.

- Individuals of Hispanic or minority racial background accounted 38.5% of survey respondents and 52% of eligible VR consumers served.
- Survey respondents were older, with a median age at application of 43; whereas the median age of all eligible consumers with open VR cases was 34. The proportion of survey respondents who were transition age youth was about 18%, which is less than half that of the population of eligible consumers, which is 38%, and the proportion of respondents ages 55 and older was 19%, or more than double that of the general population of VR consumers, which is about 9%.
- Women with disabilities accounted for 57% of the survey respondents, and 45% of the total population of eligible VR consumers.
- Individuals with a cognitive or psychosocial impairment account for 42% of the survey respondents but 69% of the total population of eligible VR consumers.
- The proportion of respondents with significant or most significant disabilities (86%) was close to that of the total population of eligible VR consumers (84%).

VR Staff CSNA Survey

NC DVRS staff members received electronic surveys consisting of two parts that respectively addressed the objectives of (a) assessing the needs of individuals with disabilities, including those with significant and most significant disabilities, and their need for supported employment services, and (b) the needs of individuals with disabilities who have been unserved or underserved by the vocational rehabilitation program. These sets of questions were intended to meet only two of the 34 CFR §361.29 requirements, although several responses overlapped with the other report requirements in that they addressed the need to collaborate with other Workforce Investment Act agencies and establish, develop, or improve community rehabilitation programs. The survey was presented in two sections. The first part of the survey requested that respondents:

- (a) Identify the most critical, second-most critical, and third-most critical needs toward becoming employed or continuing employment for people with disabilities in North Carolina, and for each;
- (b) Rate how NC DVRS responds to that need;
- (c) Identify the major gaps/barriers NC DVRS experiences when fulfilling this need; and
- (d) Recommend a solution for NC DVRS to overcome these barriers.

The second component of the survey requested that the respondents identify special populations of people with disabilities in North Carolina they considered to be unserved or underserved, the specific VR needs of these populations, and what DVRS can do to increase outreach to these unserved or underserved populations.

Surveys were completed by 370 VR staff members representing all aspects of service provision, including various levels of management, direct service staff, rehabilitation specialists and consultants, and support staff.

Table 1. NC DVRS Staff Survey Respondents by Role

NC DVRS Staff Role	Count	Percent
Managers (Regional Directors, Assistant Regional Directors, Unit Managers)	27	7.3%
Casework Supervisors (Asst. Unit Managers, Counselors in Charge)	33	8.9%
Rehabilitation Counselors (RC-1 and RC-2)	137	37.0%
Rehabilitation Specialists and Consultants*	75	20.3%
Casework Technicians and Assistants	37	10.0%
Administrative Support (Office Assistants and Lead Office Assistants)	45	12.2%
Other VR Staff (State Office and Vocational Facility staff members)	16	4.3%
Total	370	100.0%

* Includes Rehabilitation Engineers, Vocational Evaluators, Benefits Counselors, Employment Specialists, State Office Program Specialists, CRP Specialists, Quality Development Specialists, Rehabilitation Education Specialists, and the Division's Small Business Specialist and Medical Consultant.

Advocacy Organization Key Informant Survey

Electronic surveys were sent to disability advocacy organization leaders with a request to forward to their staff members as they felt appropriate. The survey consisted of two main components that respectively addressed the objectives of assessing the needs of individuals with significant and most significant disabilities, including their need for supported employment services; and the needs of individuals with disabilities who have been unserved or underserved by the vocational rehabilitation program. The first part of the survey requested that respondents:

- Identify the most critical, second-most critical, and third-most critical needs toward becoming employed or continuing employment for people with disabilities in North Carolina, and for each:
 - Rate how NC DVRS responds to that need;
 - Identify the major gaps/barriers NC DVRS experiences when fulfilling this need; and
 - Recommend a solution for NC DVRS to overcome these barriers.

The second component of the survey requested that the respondents identify special populations of people with disabilities in North Carolina they considered to be unserved or underserved, the specific VR needs of these populations, and what DVRS can do to increase outreach to these unserved or underserved populations. A total of 22 survey responses were received representing members of the following agencies and organizations, with some members representing more than one:

- Information Technology Accessibility Working Group at NC State University
- North Carolina Psychological Association
- Disability Resource Center
- Disability Rights, North Carolina
- North Carolina Association of Peer Specialists (NCAPS)
- North Carolina Mental Health Consumers' Organization
- National Alliance on Mental Illness, North Carolina
- Cardinal Innovations Healthcare Solutions
- NC DHHS - Division of Mental Health/Developmental Disabilities/Substance Abuse.

Members from these organizations advocate for employment, community involvement, and accessibility on behalf of:

- Individuals who are blind and visually impaired
- Adults with intellectual and developmental disabilities
- Adults with mental illness and substance abuse disorders, and their families
- All people with disabilities, including those with the most significant disabilities.

Workforce Development Board Director Survey

Electronic surveys were sent to the Board Directors of each of North Carolina's 23 Local Workforce Development Boards to assess the vocational rehabilitation needs of individuals with disabilities served through other components of the statewide workforce investment system (other than the vocational rehabilitation program), as identified by such individuals and personnel assisting such individuals through other components of the statewide workforce investment system. Five of the 23 Board Directors agreed to serve as key informants by participating in the survey.

The survey instrument was structured similarly to that sent to advocacy organizations in that it consisted of two main components with the first part asking the Board Director to:

- Identify the most critical, second-most critical, and third-most critical needs toward becoming employed or continuing employment for people with disabilities in North Carolina, and for each:
 - Rate how well they thought their component of the NC Workforce Development System responded to that need;
 - Identify the major gaps/barriers the NC Workforce Development System experiences when fulfilling this need; and
 - Identify what their component of the NC Workforce Development System could do to better address these barriers.

The second component of the survey requested that the Board Directors:

- Identify challenges the NC Workforce Development System as a whole faces when fulfilling the needs of people with disabilities;
- Identify what they thought could be done to overcome these challenges; and
- Identify what they thought NC DVRS and the State Rehabilitation Council could do to help in overcoming these challenges.

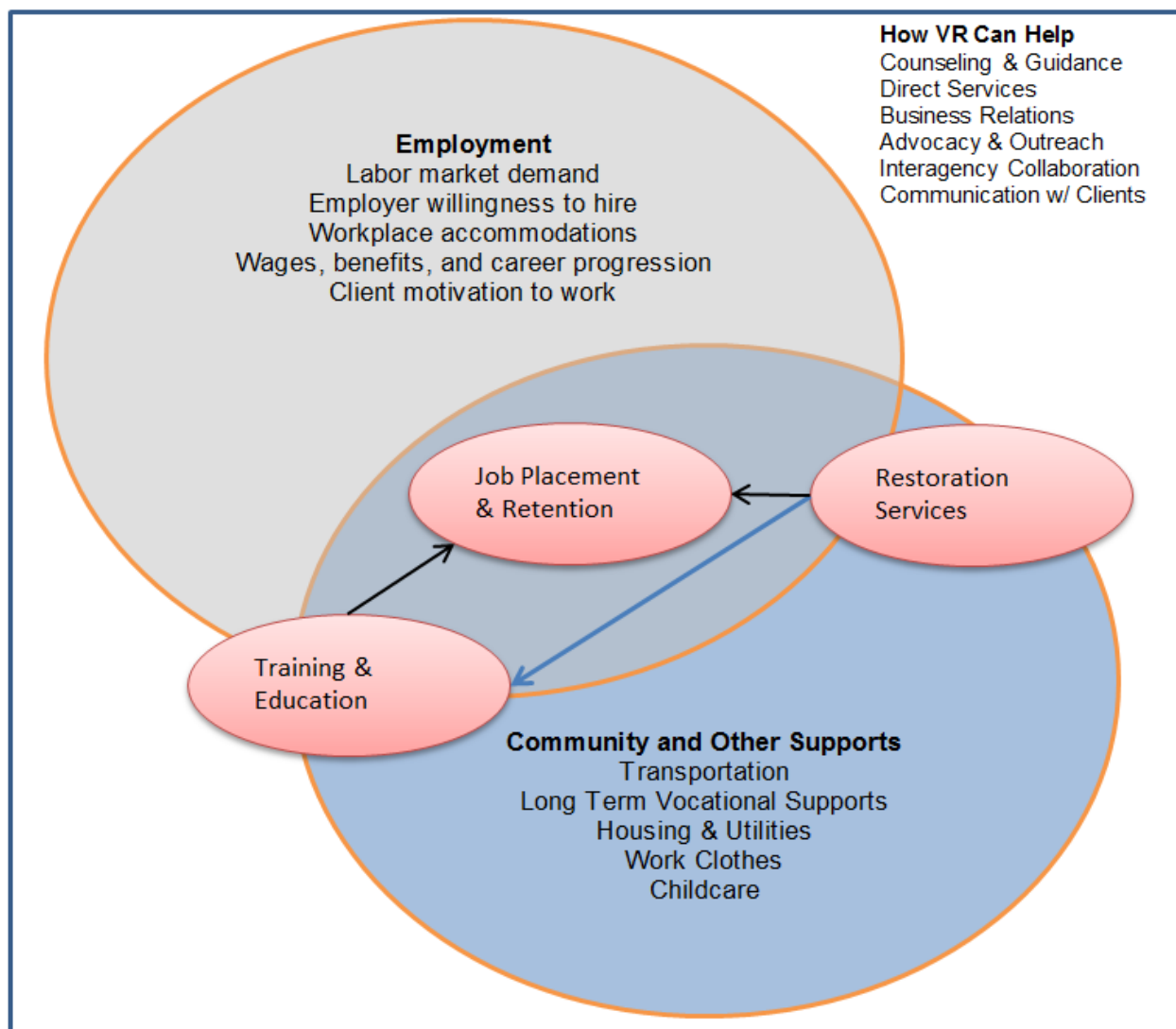
Summary of the Findings Regarding the VR Needs of People with Disabilities

This section provides a summary of the findings regarding the vocational rehabilitation needs of North Carolinians with disabilities. These data were achieved through the surveys with consumers, VR staff, and other stakeholders who served as key informants. The findings from the surveys are supplemented with secondary data from multiple sources. A more detailed account of the survey data collection process and findings is presented in complete report.

The needs of North Carolinians with Disabilities, as ascertained by the survey responses, are visually represented in the following figure, which illustrates that the most critical needs of VR consumers are related to employment services, such as job search and placement assistance, and that physical and mental restoration services and training services needs are often antecedents to job placement and retention. The need for these services is embedded in the context of two overlapping environments:

- A labor market environment consisting of various employment-related factors, including labor market demand-side factors, such as the availability of jobs, wages, benefits, and career progression, which may be influential on supply-side factors, such as the VR Consumer's motivation to work and the type and level of training the VR client will require.
- A supportive environment that provides the needs for various types of support services, most notably transportation, but also assistance with meeting basic needs such as housing and utilities, work clothes, childcare, and other support services. Some of these services can be sponsored through the VR Program, but other community resources may also provide these services until the VR consumer achieves economic stability.

Figure 1. Summary of VR-Related Needs and How NC DVRS Can Help Consumers



Results of the VR Consumer CSNA Survey of Vocational Rehabilitation Needs

The most frequently mentioned needs of individuals with disabilities, as identified by VR consumers, are listed in the table below. Job search and placement assistance, including workplace accommodations and help with job applications and interviewing skills, ranks first as having the most responses, followed by training services; transportation; physical and mental restoration services, including medication and medical supplies and equipment; on-the-job supports, such as peer mentors and job coaches; and other supports, such as help with housing, utilities, childcare, and work clothes and shoes.

Table 2. Major Categories of Need Identified by VR Consumers on the CSNA Survey

Category of Need*	Total Responses (Total = 684)		Most Critical Need		2nd Most Critical Need		3rd Most Critical Need	
	Count	% Total	Count	% Total	Count	% Total	Count	% Total
Job search & placement assistance	287	42.0%	214	74.6%	50	17.4%	23	8.0%
Training	175	25.6%	128	73.1%	36	20.6%	11	6.3%
Transportation	136	19.9%	76	55.9%	44	32.4%	16	11.8%
Physical and mental restoration, including medication and medical equipment	107	15.6%	65	60.7%	33	30.8%	9	8.4%
On-the-job supports	34	5.0%	17	50.0%	12	35.3%	5	14.7%
Other support services	32	4.7%	13	40.6%	13	40.6%	6	18.8%

*Multiple needs can be identified from a single open-ended response.

Results of the VR Staff CSNA Survey of Client Vocational Rehabilitation Needs

The most frequently mentioned needs of individuals with disabilities, as identified by VR staff members, are listed in the table below. Transportation ranks first as having the most responses, followed by employer and community awareness, training services, VR counseling and guidance, including benefits counseling, access to healthcare, including mental healthcare, and the overall labor market and economy, which has disproportionately impacted many rural areas in North Carolina. The number and percent of responses for each category is provided in the table below.

Table 3. Major Categories of Need Identified through the VR Staff CSNA Survey

Category of Need*	Total Responses (Total = 370)		Most Critical Need		2nd Most Critical Need		3rd Most Critical Need	
	Count	% Total	Count	% Total	Count	% Total	Count	% Total
Transportation	206	55.7%	94	45.6%	67	32.5%	45	21.8%
Employer / community education & awareness	169	45.7%	83	49.1%	52	30.8%	34	20.1%
Training services	95	25.7%	36	37.9%	33	34.7%	26	27.4%
VR counseling & guidance	94	25.4%	49	52.1%	14	14.9%	31	33.0%
Access to healthcare	91	24.6%	25	27.5%	36	39.6%	30	33.0%
Labor market & economy	89	24.1%	23	25.8%	48	53.9%	18	20.2%

*Multiple needs can be identified from a single open-ended response.

Transportation Services

This category was the most frequently mentioned, with 206 (56%) of the 370 VR staff members indicating this need. Of the 206 responses identifying this need, 94 (45.6%) identified it as the most critical need, 67 (32.5%) identified it as the second most critical, and 45 (21.9%) as the third most critical VR-related need for North Carolinians with disabilities. Responses in this category address the need for transportation, especially with regard to accessibility and lack of public transportation availability in rural areas and when work shifts are not regular, and also with regard to the cost of private transportation, including the costs of maintaining a vehicle and insurance.

Major service gaps or barriers NC DVRS experiences when fulfilling this need were:

- Public transportation services: Lack of funding and no public transportation in rural areas. Many NC cities do not have public transportation available, and those that do, do not serve rural areas.

In cities that do have transportation, the system only operates on a fixed schedule and doesn't meet the needs of consumers that have to work weekends or the night shift. Work locations may not be close to bus routes.

- Private transportation services: There is a lack of private providers willing to provide transportation at a reasonable rate, and consumers do not have the money to pay someone to drive them to and from work.
- Personal transportation: Many VR consumers don't have a license and/or vehicles, and have no family member or friend to provide transportation. They have lost their license due to previous substance dependence, cannot obtain a license due to their disabling condition, cannot drive due to their condition, and/or cannot drive due to the side-effects of necessary medications. Some VR consumers who are able to drive cannot afford to because they are on limited income (SSI, SSDI, etc.) or have not had income due to their condition.
- Vehicle modifications: The current policy regarding agency contribution toward the cost of vehicles for modification purposes is the major barrier to someone who needs to purchase a modified vehicle.
- VR policy isn't adjusted for geographical differences: Tighter policy controls on transportation costs/payment which disregard individual geographical needs. When cases are looked at for compliance and fiscal management it is with a critical eye toward this and other types of maintenance expenses which may or may not occur in other geographical or economic conditions/situations.
- VR sponsorship of transportation is a short-term solution: NC DVRS is not presently set up to provide ongoing transportation services for individuals after they have been employed. Sponsored transportation is meant as a short-term solution.
- VR sponsorship of transportation is a time-consuming process, and sometimes unreliable: Even when we can justify sponsorship of public or private transportation services, often the process is time consuming and the provider unreliable, thus creating a major delay in requested and agreed upon services.

Recommended solutions for NC DVRS to overcome a lack of transportation as a barrier to employment for people with disabilities included:

- Increase vendorships with private transportation companies: Engage in more vendorships with private transportation companies to assist in helping disabled employees get to/from work.
- Promote small business opportunities for consumers: Encourage clients who are interested in small business to invest in transportation to become VR vendors. Help consumers that are able to start their own business in supplying transportation services in those rural areas that are underserved. We could use state vehicles and pay consumers as drivers, and consumers could also be employed to do maintenance and repairs on the cars -- the process could be used for training clients.
- Collaborate with local transit authorities: The local areas will have to develop affordable transportation, so work closely with the local transit authority staff. Partner with local transportation authorities to provide free or reduced fares to people with identified disabilities to and from work, and to provide services at nights and on weekends. Advocate on behalf of people with disabilities regarding the need for accessible transportation. NC DVRS can serve on a task force or community forum to address concerns pertaining to transportation, and inform their counties of potential grants or express concerns pertaining to transportation for people with disabilities and see how the community can come up with a solution.
- VR Policy Changes: Separate transportation costs for clients from the general 'maintenance' category. This could be a more flexible expense that truly reflects a regional or local need. Make the policies specific and eliminate the gray areas so that they are consistently applied. Increase funding to expand the purchase of vehicles for modification purposes.

- Speed-Up the Process: Reduce time to approve special transportation requests.

The Need for Community and Employer Education and Employer Willingness to Hire and Accommodate Workers with Disabilities

One of the major themes for this question related to the issue of public and employer perceptions of VR and people with disabilities, and specifically with regard to their willingness to work with our agency and hire our consumers. Of the 370 VR staff members who responded to the survey, 169 (46%) indicated this need. Of these, 83 (49%) identified it as the most critical need, 52 (31%) identified it as the second most critical, and 34 (20%) as the third most critical VR-related need for North Carolinians with disabilities.

Responses in this category relate to employer attitudes towards people with disabilities, and their willingness to hire people with disabilities, including job creation, job carving and making accommodations. Responses in this category also address larger societal and cultural myths and stereotypes about people with disabilities. VR staff members identified a need for public awareness and education regarding employment for people with disabilities; business relations; and the dual-customer approach

Major service gaps or barriers NC DVRS experiences when fulfilling this need were:

- Negative perceptions towards people with disabilities: VR staff members wrote that public and employer perceptions of individuals with disabilities were a major barrier. This included VR consumers with an obvious disability who can't get past human resources because they assume that individual can't perform the required functions of the position based on physical appearance. Other reasons included that people just don't see the disabled as normal and feel uncomfortable around them. This barrier of negative attitudes and perceptions is described in terms of *misinformation, myths, stigma and discrimination*, and also *risk* -- that employers feel that it's a risk to hire someone with a disability because the person may become a liability to their business. The issue of risk was said to be more applicable to smaller employers that were resistant to taking chances or making accommodations. The preference for an employee without a disability was also said to relate to higher job competition in areas where unemployment was higher, in which there were many applicants for one job opening, placing our consumers at a considerable disadvantage.
- Limited VR resources for dual customer approach, and employer outreach and education: VR staff members wrote that implementation of the dual customer approach, and other employer outreach and education efforts were limited by VR resources, including limited use of social media. Staff members wrote that the business relations representatives were essential to their efforts, but that their catchment areas were too large, and that they could not do it all themselves. VR staff wrote that they needed more assistance with the employer outreach and did not have enough time to market VR and services to employers as they should. They also wrote they needed more leadership for this function in DVRS, best practices in its implementation, and more effective management and teamwork in many offices to effectively use the resources they have. Currently, there is no outreach plan, unit offices have little or no funds for advertising to employers, and that the materials they do have are out-of-date. This sentiment wasn't across the board, as some staff members noted that some counselors are actively building relationships with employers and educating them, but that it was not being consistently done by everyone.

Recommended solutions for NC DVRS to reduce negative public and employer perceptions and attitudes toward people with disabilities, and increase employers' willingness to hire our consumer included:

- Having an outreach plan and expanding the outreach and disability awareness and education for employers and the community. Recommendations included educating policymakers, and increasing involvement with business associations, chambers of commerce, workforce boards, and other organizations;
- Marketing VR to employers through traditional and newer channels of communication, including social media; and

- Increasing outreach capacity through counselors and business relations representatives (BRRs), including in-person and electronic networking activities. The means of increasing outreach capacity included paperwork reduction and increasing the number of counselors and casework technicians to reduce caseload size and allow counselors more time for outreach activities, in addition to increasing the number and availability of BRRs.

The Need for More Jobs and Higher Paying Jobs in a Changing Economy

Closely related to the need for employers to be willing to hire individuals with disabilities is the need for a better labor economy, with more job openings, full-time work, and higher wages. Of the 370 VR staff members who responded to the survey, 89 (24%) indicated this need. Of these, 23 (26%) identified it as the most critical need, 48 (54%) identified it as the second most critical, and 18 (20%) as the third most critical VR-related need for North Carolinians with disabilities.

Responses in this category relate to a lagging economy and shortage of jobs, particularly in rural areas, and that the jobs that are available are often part-time or low-wage positions. The imbalance between labor-market supply and demand allows employers to be more selective in their hiring, often bypassing VR consumers, and especially those with criminal backgrounds.

Major service gaps or barriers NC DVRS experiences when fulfilling this need were related to high unemployment and changes in the types of jobs that are available, which is often unfavorable for VR consumers with work limitation. VR staff members also reported that employers can be more selective in their hiring, and may be resistant to taking the time or assess the costs for job carving, on-the-job training, job coaches, or additional healthcare coverage. A common theme was that many of these factors were due to economic conditions outside of the Division's control.

Recommended solutions for NC DVRS to increase employment opportunities for our consumers in the face of a declining job market for low-skill workers and workers with employment limitations or who require accommodations:

- Employer incentives and advocacy for workforce development, including employer education on the value of hiring workers with disabilities and incentives, such as subsidized insurance, that would motivate employers to hire VR consumers and tax breaks that would attract new businesses to NC.
- Increased networking, outreach and business relations to make the connections between employers and VR consumers receiving job search assistance and placement services.

The Need for Job Skills Training and Education for VR Consumers

Of the 370 VR staff members who responded to the survey, 95 (26%) indicated job skills training and education were an unmet need. Of these, 36 (38%) identified it as the most critical need, 33 (35%) identified it as the second most critical, and 26 (27%) as the third most critical VR-related need for North Carolinians with disabilities. Responses in this category are specific to vocational or job skills training and academic education, and do not include interpersonal or soft skills training, or employability training on how to self-market and search for jobs, which are included the category for job search and placement assistance.

Major service gaps or barriers NC DVRS experiences when fulfilling this need most generally in terms of:

- Lack of resources: funding, staff, and programs within DVRS to assist individuals with obtaining the necessary skills to transition into employment.
- Procedural barriers, mainly policies on transferrable work skills, the vendor approval process, and the approval process for training services, which was described as "layered."
- The short-term measure of a successful outcome rather than a focus on career employment.
- Client motivation to participate in training programs.

Recommended solutions for NC DVRS to increase or improve training services included:

- Increase collaboration with community colleges and have a VR representative on campus.
- Expand training programs, including those administered through WorkSource East and WorkSource West.
- Sponsor GED completion for adult high-school dropouts, and provide assistance with mileage to for clients to travel to GED/HSD sites, and also assistance with loan of computer/laptop or assistance with onsite computers at VR offices for consumers to access training.
- Help consumers identify resources for training or companies that are willing to provide training.
- Review vendor approval policies and evaluate the criteria for vendor approval, especially schools or training sites.
- Develop business relationships with employers and provide incentives for on-the-job training and internships.

The Need for Access to Healthcare and Mental Health Services

Of the 370 VR staff members who responded to the survey, 91 (25%) indicated that access to healthcare and mental health services, including dental care and VR sponsored restoration was a critical need. Of these, 25 (27%) identified it as the most critical need, 36 (40%) identified it as the second most critical, and 30 (33%) as the third most critical VR-related need for North Carolinians with disabilities. Responses in this category refer to medical and mental health treatment, including medications and treatment for substance abuse.

Major service gaps or barriers NC DVRS experiences when fulfilling this need most generally in terms of:

- Lack of resources, mainly community resources and the NC mental health system.
- The trend of employers hiring part-time workers to avoid having to provide medical insurance.
- VR policies and focus, which include limitations on the provision of restorative services, although staff members also reported an increased emphasis on placement over restoration.

Recommended solutions for NC DVRS to increase access to healthcare and mental healthcare services:

- VR staff training on restoration policies.
- Tele-psychiatry for lower cost mental health services.
- Advocacy.
- VR staff awareness about companies that assist with prescriptions, grant writing, and the newer processes/eligibility requirements for certain services through social services and local management entities.
- Increased collaboration with providers and the development of new programs.

The Need for Counseling and Guidance, Including Benefits Counseling

Of the 370 VR staff members who responded to the survey, 94 (25%) indicated that counseling and guidance, including motivational counseling and benefits counseling was one of the three most critical VR-related needs. Of these, 49 (52%) identified it as the most critical need, 14 (15%) identified it as the second most critical, and 31 (33%) as the third most critical VR-related need for North Carolinians with disabilities. Responses in this category refer to counseling and guidance by our VR counselors, including career counseling with referrals to other appropriate services, and also to the need for benefits counseling and motivational counseling to increase client motivation to return to work. Responses concerning client awareness of available services and willingness to return to work are also included in this category. Client motivation, awareness, self-esteem, cooperation, and work-willingness were most typically addressed as the need, gap or barrier to employment to which increasing VRs capacity for benefits counseling, VR

counseling and guidance, including motivational counseling, and referrals to other appropriate was presented as a solution.

Major service gaps or barriers NC DVRS experiences when fulfilling this need most generally in terms of: (a) consumers' needs for VR services, but lack of motivation to become employed, some of which is driven by disincentives to work, including the potential loss of SSI, SSDI or other public benefits; and (b) the lack of resources, including time, additional counselor positions, and expertise required for better counseling and guidance. The lack of resources was said to be in part due to counselor vacancies, lack of support staff, and attention to non-counseling related activities, such as focusing on meeting performance measures and processing paperwork.

Recommended solutions for NC DVRS to increase its capacity for counseling and guidance and help further motivate consumers to enter or reenter the workforce, particularly those receiving SSI or SSDI benefits included increasing VR counseling capacity through: (a) smaller caseloads; (b) paperwork reduction; (c) a decreased focus on performance measures and increase attention to holistic counseling; (d) hiring additional counselors and support staff; and increasing the quality of VR counselors through training and higher salaries. These were said to attract and retain high quality counselors and allow the counselors more one-on-one time with the consumer to provide counseling and guidance, including motivational counseling. The most frequently mentioned solution for increasing client motivation for our consumers receiving public benefits, such as SSI or SSDI, was to increase benefits counseling services.

Results of the Advocacy Key Informant CSNA Survey Regarding VR Needs

In response to the question of what were the critical needs toward becoming employed or continuing employment for people with disabilities in North Carolina, the major categories of responses were:

The Need for Employer Willingness to Hire and Retain Workers with Disabilities

This category had the most frequent responses, with 18 (82%) of 22 advocates indicating this need as the most critical (33%), second most critical (45%), or third most critical (22%) employment-related need for North Carolinians with disabilities. This category includes responses related to employer willingness to address physical and perceived obstacles; disadvantageous job competition between people with and without disabilities, especially in areas or during periods of higher unemployment; and social stigma or negatively biased attitudes towards people with disabilities by employers and peer employees without disabilities, including a response related to the "double whammy" of people with a disability having a criminal background.

The Need for Job Supports, Including Long-Term Supports

This category had the second-most frequent number of responses, with 8 (36%) of 22 advocates indicating the need for additional job coaching and job supports, including peer supports was the most critical (62.5%), second most critical (25%), or third most critical (12.5%) VR-related need for North Carolinians with disabilities.

The Need for Transportation Services

This category also had the second-most frequent number of responses with 8 (36%) of 22 advocates indicating this need as the most critical (75%), second most critical (12.5%), or third most critical (12.5%) VR-related need for North Carolinians with disabilities. Responses in this category address the need for transportation, especially with regard to accessibility and lack of public transportation availability in rural areas, and when work shifts are not regular.

The Need for Staff Development and More Empathy for VR Consumers by Providers

This category was discretely identifiable with 3 (14%) of 22 advocates indicating a need for sensitivity and empathy among service providers, such as clinicians, and particularly with regard to consumers with addiction disorders. There was one response each (33%) as this being most, second most, or third most critical VR-related need for North Carolinians with disabilities.

Workforce Development Board Director Survey of VR Needs for People with Disabilities

Workforce Development Board Directors were asked to identify the critical needs of people with disabilities in North Carolina toward becoming employed or continuing employment. The major categories of need, the average rating regarding how well the Workforce Development Boards respond to these needs, the barriers they face, and proposed solutions are summarized in the table below.

Table 4. Workforce Development Board Director Key Informant Responses

VR Need	Rating*	Barriers	Solutions
Client Training and Job Skills Development	3.4	The system doesn't specialize in serving folks with disabilities.	Training for staff in the different types of disabilities.
		Getting employers who allow flexible working schedules.	Continue to market our services to employers.
		Lack of partnerships with Vocational Rehabilitation to serve people with disabilities.	One Stop Center staff can refer customers to VR. Continue to build rapport with our other Workforce partners. Bridge the gap with employers.
		Clients may not be aware of the other services available (WIA).	VR can present information about One Stop Centers (JobLink Career Centers) and WIA programs to customers.
More employers to hire and accommodate people with disabilities	3.0	Lack of funding to educate business on the hidden workforce available.	Continued partnerships with agencies that specialize in providing services for those with disabilities
		Lack of employer knowledge of available accommodations that can be made.	Train our staff, educate employers, and promote hiring of individuals with disabilities to employers.
Transportation and other Support Services	3.3	Insufficient public transportation.	Provide more assistance with transportation besides public transportation.
		Lack of funding for support services.	Provide funding.
		Lack of coordination of services.	Coordinate resources and have a coordinated plan.
Training and resources related to Assistive Technology for One-Stop Centers	3.0	Lack of funding and training.	Have funding to purchase, build infrastructure, and install technology that assist individuals with disabilities

* Ratings are from the Workforce Development Board's response to these needs on a 5-point scale, with 5 being "excellent." Ratings between 3 and 4 indicate "average."

Minorities and Other Underserved Populations of Individuals with Disabilities

This portion of the CSNA is an assessment of minorities and other populations of North Carolinians with disabilities that identified as unserved or underserved by the VR Program. The first subsection provides a comparison between eligible VR consumers served in FFY 2013 and the population of North Carolinians with disabilities, as identified through the 2012 American Community Survey (ACS). The second subsection identifies unserved and underserved populations through surveys with VR staff members and advocacy group key informants. The findings of the latter reveal some of the limitations inherent in the ACS data. Specifically, with ACS data, the population of people with mental illness, which was identified as an underserved population by 76% of VR staff members, is not discernible from the population of people with intellectual disabilities, which, comparatively, was identified as an underserved population by

15% of VR staff members. Based on the wording of the disability questions on the ACS, which do not address interpersonal and behavioral impairments, including difficulty coping, the population of people with behavioral health issues may be significantly underreported in the ACS data.

Another limitation of the ACS data in defining the population frame for VR consumers is that the ACS questionnaire does not include any questions regarding criminal history, which was identified in the CSNA surveys as a key data point in defining barriers to employment and an underserved VR client population. The findings of the CSNA surveys, in this regard, are supported by VR client data: 22% of eligible VR clients eligible for services during the triennial CSNA period have a record of criminal conviction or a recent arrest with charges pending, 18% of eligible VR clients served over the past five years have a prior record with the NC Division of Adult Correction and Juvenile Justice, meaning they were convicted of a violation of North Carolina law, with sentences ranging from probation served in the community to incarceration in one of the state's prison facilities; and 7.5% were on probation or parole at the time they apply for VR services.

NC DVRS and State Disability Demographics from the 2012 ACS

This section provides comparisons between the NC population of individuals with disabilities, as defined on the 2012 ACS and eligible VR consumers served October 1, 2012 through September 30, 2013. The data from the ACS was obtained via the Cornell University Employment and Disability Institute (Retrieved from www.disabilitystatistics.org). The ACS defines four broad categories of disability from a "yes" response to the following questions:

- Hearing Disability (asked of all ages): *Is this person deaf or does he/she have serious difficulty hearing?*
- Visual Disability (asked of all ages): *Is this person blind or does he/she have serious difficulty seeing even when wearing glasses?*
- Cognitive Disability (asked of persons ages 5 or older): *Because of a physical, mental, or emotional condition, does this person have serious difficulty concentrating, remembering, or making decisions?*
- Ambulatory Disability (asked of persons ages 5 or older): *Does this person have serious difficulty walking or climbing stairs?*

Additionally, there are two separate questions that identify self-care and independent living disabilities. The category, *Any Disability*, includes a "yes" response to one or more individual disability types.

In developing comparable categories from the RSA-911 impairment codes, Hearing Disability included impairment codes 03-08; Visual Disability included impairment codes 01, 02, and 08; Cognitive Disability included impairment codes 09 and 17-19; and Ambulatory Disability included impairment codes 13-16. A significant limitation of this crosswalk is that it is somewhat of a forced fit of the RSA-911 impairment data. For example, there are physical impairments caused by chronic medical conditions included in the Ambulatory Disability category that may but do not necessarily cause serious ambulatory limitations, and there are psychosocial and expressive/receptive impairments included in the Cognitive Disability category that may but do not necessarily seriously impair memory, concentration, and decision-making.

Comparison of VR Consumers and the NC Population by Age and Disability

The following table shows a comparison of the 2012 ACS estimated population of North Carolinians with disabilities and eligible VR clients served during FFY 2013 by age group and disability type, and the percent of the state's population of individuals with disabilities served by the VR Program in FFY 2013, which is sometimes referred to as a population penetration rate.

In North Carolina, the estimated prevalence of disability increases with age, as was found in the 2010 CSNA. For 16 to 20 year-olds, prevalence is 5.4%, and among people ages 21-64 the prevalence rate is 11.7%. These rates are lower than were reported in the 2010 CSNA, but this is due to changes in the wording of ACS questionnaire items and not a reduction in the actual prevalence of disability.

Among 16-20 year-olds, the population penetration rate is 30.7% overall, and 39.3% for youth with cognitive disabilities, which is a large VR consumer population segment, accounting for 18% of all VR

clients. The population penetration rate is less than 1% for youth with visual disabilities, though this may be due to services available through other programs, including the NC DHHS Division of Services for the Blind. The penetration rate is 11.3% for youth with hearing disabilities, which may suggest additional efforts could be made to serve this population, although services provided through the North Carolina School for the Deaf, and the NC DHHS Division of Services for the Deaf and Hard of Hearing may also be available.

In the population of working age adults, ages 21-64, the penetration rate is much lower: 7.2% for any disability, and less than 5% for each of the individual disabilities types except cognitive disabilities, which was 12.7%, when including adults with psychosocial disabilities. Individuals with cognitive and psychosocial disabilities account for nearly 71% of all adult VR consumers. Although the population penetration rate was considerably lower for adults with other types of disabilities, this does not necessarily indicate that these groups are underserved. Excepting CRP services, most other direct cost services sponsored by the North Carolina VR Program are subject to a financial needs test, and so the program is more tailored toward providing CRP services for individuals with cognitive and psychosocial impairments, and restoration and training to only the subgroup of people with physical and sensory impairments who are financially eligible for such services. Additionally, many people with physical disabilities find jobs for themselves independent of the VR Program. Other factors, such as a criminal history, which is more prevalent among VR consumers with cognitive and psychosocial disabilities, create additional barriers to employment.

Table 5. VR Consumers and ACS Population Estimates by Age and Disability Type

Age Group ¹	Disability Type ²	Estimated Population of North Carolinians with Disabilities (ACS 2012)				NC VR Clients Eligible for Services with Cases in Service, FFY 2013		Percent of NC Population Served by VR in FFY 2013
		Prevalence		Count	% Total	Count	% Total	
		Rate	MoE ³					
Ages 16-20	Any Disability	5.4%	0.63%	36,600	100.0%	11,224	100.0%	30.7%
	Visual	0.8%	3.29%	5,700	15.6%	45	0.4%	0.8%
	Hearing	0.3%	3.29%	2,200	6.0%	248	2.2%	11.3%
	Ambulatory	0.6%	3.29%	3,900	10.7%	1,008	9.0%	25.8%
	Cognitive	3.9%	0.54%	26,800	73.2%	10,543	93.9%	39.3%
Ages 21-64	Any Disability	11.7%	0.31%	658,900	100.0%	47,216	100.0%	7.2%
	Visual	2.3%	0.14%	129,000	19.6%	428	0.9%	0.3%
	Hearing	2.3%	0.15%	131,700	20.0%	2,325	4.9%	1.8%
	Ambulatory	6.3%	0.24%	355,600	54.0%	17,044	36.1%	4.8%
	Cognitive	4.6%	0.20%	261,600	39.7%	33,346	70.6%	12.7%

¹ VR client age on 9/30/2013.

² Individuals can have more than one disability type.

³ Margin of Error (MoE) is a measure of the degree of sampling variability at the 90% confidence level. This means that there is a 90% certainty that the actual value is between the reported rate plus or minus the margin of error. Smaller population estimates are less precise and will have a higher margin of error.

Comparison of VR Consumers and the NC Population by Minority Background and Disability

The following table shows a comparison of the 2012 ACS estimated population of North Carolinians with disabilities and eligible VR clients served during FFY 2013 by minority race and ethnicity, and disability type, and the population penetration rate or percent of the state's population of individuals with disabilities served by the VR Program in FFY 2013.

In FFY 2013 about 52% of all eligible VR consumers were of a minority race or ethnicity, and 90% of minorities were Black or African American. The prevalence of disability among African Americans, ages

16-64, is estimated at 13.9%. The penetration rate for the population of African Americans with disabilities is 14.7% for any disability; 27.7% for cognitive disabilities; 7.9% for ambulatory disabilities; and 3.9% for hearing disabilities.

Comparatively, the prevalence of disability among American Indians is the highest at 15.7%, and the penetration rate for this population is lower than for African Americans, with 9.6% for any disability; 16.2% for cognitive disabilities; 5.0% for ambulatory disabilities; and 2.7% for hearing disabilities.

The prevalence rates for Hispanics and Asians are considerably lower than for African Americans and American Indians, at 5% and 3.8%, respectively. The reason for this was explored in the 2010 CSNA, which identified US nativity as a factor associated with higher prevalence of disability. However, although the prevalence rates are low, the penetration rates for these populations are also very low. For Hispanics, the penetration rate is 6.4% for any disability; 11.3% for cognitive disabilities; 4.2% for ambulatory disabilities; and 2.1% for hearing disabilities. For Asians, the penetration rate is 5.1% for any disability; 12.5% for cognitive disabilities; 4.4% for ambulatory disabilities; and 4.6% for hearing disabilities. VR Staff members identified non-English speaking populations, including Hispanics and Asians, as unserved, and these data identify these groups as having the lowest population penetration rates.

Table 6. VR Consumers and ACS Population Estimates by Minority Race and Disability Type

Race or Ethnicity ¹	Disability Type ²	Estimated Population of North Carolinians with Disabilities Ages 16-64 (ACS 2012)				NC VR Clients Eligible for Services with Cases in Service, FFY 2013		Percent of NC Population Served by VR in FFY 2013
		Prevalence		Count	% Total	Count	% Total	
		Rate	MoE ³					
Black or African American	Any Disability	13.9%	0.68%	192,800	100.0%	28,345	100.0%	14.7%
	Visual	2.9%	0.33%	40,300	20.9%	276.0	1.0%	0.7%
	Hearing	1.8%	3.29%	24,300	12.6%	938.00	3.3%	3.9%
	Ambulatory	7.7%	0.52%	106,300	55.1%	8,428	29.7%	7.9%
	Cognitive	5.7%	0.45%	78,200	40.6%	21,665	76.4%	27.7%
American Indian or Alaskan Native	Any Disability	15.7%	3.07%	11,500	100.0%	1,106	100.0%	9.6%
	Visual	3.5%	1.55%	2,600	22.6%	6	0.5%	0.2%
	Hearing	2.7%	1.38%	2,000	17.4%	53	4.8%	2.7%
	Ambulatory	10.2%	2.56%	7,500	65.2%	376	34.0%	5.0%
	Cognitive	6.6%	2.10%	4,900	42.6%	793	71.7%	16.2%
Asian	Any Disability	3.8%	1.09%	6,100	100.0%	314	100.0%	5.1%
	Visual	1.1%	3.29%	1,800	29.5%	2	0.6%	0.1%
	Hearing	0.4%	3.29%	700	11.5%	32	10.2%	4.6%
	Ambulatory	1.6%	3.29%	2,600	42.6%	114	36.3%	4.4%
	Cognitive	1.0%	3.29%	1,700	27.9%	212	67.5%	12.5%
Hispanic or Latino	Any Disability	5.0%	0.69%	26,100	100.0%	1,679	100.0%	6.4%
	Visual	1.0%	3.29%	5,200	19.9%	18	1.1%	0.3%
	Hearing	1.2%	3.29%	6,100	23.4%	126	7.5%	2.1%
	Ambulatory	2.0%	3.29%	10,300	39.5%	429	25.6%	4.2%
	Cognitive	2.2%	0.46%	11,200	42.9%	1,267	75.5%	11.3%

¹ Individuals can have more than one race and individuals of Hispanic or Latino ethnicity can be of any race.

² Individuals can have more than more disability type.

³ Margin of Error (MoE) is a measure of the degree of sampling variability at the 90% confidence level. This means that there is a 90% certainty that the actual value is between the reported rate plus or minus the margin of error. Smaller population estimates are less precise and will have a higher margin of error.

NC DVRS Staff Survey Part 2: Identifying Underserved Populations

Of the 370 VR staff members that completed the survey, 320 (86.5%) identified one or more specific populations of individuals with disabilities that were unserved or underserved, including 9 (2.4%) staff members who indicated that all populations of individuals with disabilities were underserved. The remainder included 16 (4.3%) that indicated that there weren't any underserved populations and 34 (9.1%) that either didn't answer the question or responded that they didn't know or were unsure. The following section shows the specific populations of North Carolinians with disabilities that staff members identified as underserved.

People with Mental Illness

Of the 370 staff respondents, 76 (21%) identified individuals with mental illness as an underserved population. This category includes mental illness, in general, and also individuals where mental illness is concurrent with another disabling condition, such as substance abuse disorder, or particular demographic characteristics, such as being of younger or older age, having low income or being homeless, and having a criminal background.

The three most frequently mentioned **VR needs** specific to this population were identified as follows:

- Mental Health Services: 40 (53%) of the 74 VR staff members who identified people with mental illness as an underserved population indicated the need for additional mental health services. The NC mental health system was said to be both fragmented and limited, and clients may not receive ongoing treatment needed for stable employment. Mental healthcare is not always available for the client, and timeliness of services was said to be an issue: It can take months to get an appointment with another agency. Responses in this category included a need for community-based, outpatient care that is more comprehensive and affordable, with continuity of care, including medications and counseling from licensed professionals. This includes mental health evaluations by medical professionals; psychotherapy, as appropriate; and long-term monitoring and medication management to stabilize them so they can work and have productive lives.
- Support Services: 22 (29%) of the 74 VR staff members who identified people with mental illness as an underserved population indicated the need for additional support services, including support to their families and employers. Staff members indicated that this population often has basic needs that are unmet including housing, transportation, and food, but also that there was a need for long-term vocational supports.
- Willingness of Employers to Hire and Make Accommodations: 19 (26%) of the 74 VR staff members who identified people with mental illness as an underserved population indicated the need for overcoming the stigma of mental illness for employers. Responses in this category related stated a need for "open-mindedness" among employers, regarding their willingness to hire and flexibility in scheduling and other workplace accommodations. As one respondent put it, "too many employers see them as just "crazy." Also included in these responses was the need for better trained client advocates and job coaches to help with job placement and to educate employers.
- Other:
 - Outreach: I have answered the phones with VR for over 21 years and I know what people say when they call. They call here because they have been referred to VR and a lot of referrals don't understand that depression, bipolar and other medical conditions are disabilities. They think you have to be in a wheelchair to be considered disabled. We need to target folks that have disabilities and are unaware of it. We need to educate our referral sources and the general public on what VR does. We need to use language that is easy to understand. The general public does not understand language like disability, impairment, impediment, limitations to employment, and chronic conditions. We need to market these folks that have disabilities but don't understand that they have a disability.

Individuals with Cognitive Impairments and Developmental Disabilities

Of the 370 staff respondents, 55 (14.9%) identified people with cognitive impairments and developmental disabilities as an underserved population. This population was identified more often from casework supervisors (30.3%) than from VR managers, counselors, and specialists and consultants (group average = 16.9%). For the purpose of classification, this population includes people with autism and brain injuries, including individuals who are high functioning but still in need of support.

The **VR needs** specific to this population were fairly diverse, and inclusive of most every service provided or sponsored by the VR Program. This is likely because, as a few staff members indicated, the needs of this population “varied according to the nature of the disability,” and were highly individualized: “one size does not fit all.” The most frequently mentioned **VR needs** specific to this population are identified as follows:

- Education, training, job coaching and related supports: The need for training and training-related supports was the most common need mentioned: The needs in that category include traditional education, but also other types of training, including job skills development, work adjustment training services, and specialized cognitive training and interpersonal skills training.
- Supported Employment and increased CRP service capacity: Respondents wrote there was a need to continue existing programs and increase service capacity through additional programs.
- Employment Services, job availability and employer willingness to hire and make accommodations: Responses in this category related to the need for job placement services, the lack of availability of jobs for this population, the need to educate employers and have employers willing to hire and make accommodations for individuals with cognitive impairments and developmental disabilities, including autism and those resulting from brain injuries.
- Training for VR and CRP Staff, and more individual attention: There were a few responses that indicated a need for additional training and specialization for VR and CRP staff. This category also includes the related need of more individual attention.

Criminal Offenders and Ex-Offenders

Of the 370 staff respondents, 36 (9.7%) of the 3 identified people with disabilities and criminal records, particularly those with felony convictions, inmates, and individuals on probation or parole as an underserved population. Descriptions of this population included concurrence with mental illness and substance abuse disorder, but were not limited to these populations. The distribution of the staff members that identified this population is shown in the table below, which indicates that the perception that ex-offenders and inmates were an underserved population was considerably less frequent among VR managers, supervisors, and counselors than VR staff members in other roles.

The most frequently mentioned **VR needs** specific to this population were identified as follows:

- Willingness of Employers to Hire: 17 (47%) of the 36 VR staff members who identified people with disabilities and a criminal background as an underserved population indicated the need to find employers willing to hire them, regardless of their criminal history, which may require additional employment services, including additional job search assistance and selective placements.
- Training and job readiness: 13 (36%) of the 36 VR staff members who identified people with disabilities and a criminal background as an underserved population indicated the need for job skills training, education, and other skills development, including the need to develop interviewing and social skills.
- Other needs: Single responses indicating a need for case management assistance, peer supports, transition services, and support systems.

People with Substance Abuse Disorder

Of the 370 staff respondents, 27 (7.3%) identified people with a substance abuse disorder as an underserved population.

The specific needs of this population were not neatly identified because they were most frequently mentioned in concurrence with the needs of other the populations, such as individuals with mental illness, consumers that were homeless, those with a criminal backgrounds, or some combination of these. The most frequently mentioned **VR needs** that seemed most specific to this population were identified as follows:

- Treatment and relapse prevention services: These services include placing a priority on treatment first so that the client can pass a drug screening test, with mention of recovery houses and Narcotics Anonymous and Alcohol Anonymous meetings, counseling and relapse prevention.
- Support services: These include all types of support services provided through the VR program, including transportation services.
- Employment services and employer willingness to hire and provide accommodations: Examples of responses include:

Ethnic Minorities

Particularly Hispanics/Latinos, Immigrants and Non-English Speaking Consumers: Of the 370 staff survey respondents, 26 (7.0%) identified people with disabilities of minority backgrounds as underserved, 24 of which identified Hispanic or Latino non-English speaking individuals, although other racial and ethnic minorities, including individuals of Hmong, American Indian, and Muslim backgrounds were also mentioned in four of the responses. Examples of responses include:

The most frequently mentioned **VR needs** specific to this population were identified as follows:

- Language Communications: 13 (57%) of the 23 responses identified language communications, and the need for interpreter services or bilingual VR staff as the specific need for this population:
- Outreach Services: 4 (17.4%) of the 23 respondents responded that a cultural barrier existed and that there is not enough outreach to these populations. This relates to language communications in that one respondent wrote that it was the reason this population was overlooked.
- Other Needs: single responses indicating basic education, interviewing skills, transportation, and loss to follow-up due to seasonal work.

Advocacy Key Informant Survey Part 2:

Of the 22 respondents, 16 (73%) identified one or more populations of people with disabilities they considered to be unserved or underserved in North Carolina.

People with Mental Illness

Five respondents identified individuals with mental illness as an underserved population. The specific **VR needs** of this population were identified as follows:

- Job supports on a regular basis.
- Training on how to do task from start to finish; how to evaluate when task is done properly; how to receive judgment and criticism and redirection.
- Higher learning or high school/GED completion, job skills training, résumé writing, interview skills.
- Clear expectations, by VR, Community Rehabilitation Programs, other government agencies, parents, teachers, and employers. Then, a supportive philosophy, with accompanying policies, practices and funding.

People with Intellectual and Developmental Disabilities

Five respondents identified people with intellectual and developmental disabilities, including or especially those with profound or most significant disabilities and physical disabilities as an underserved population. The specific **VR needs** of this population were identified as follows:

- As with people with mental illness, clear expectations from VR, other involved agencies, parents, schools, and employers.

- Cost-effective, perhaps group services for those who with limited skills and the potential to work independently.
- Educating employers to help them understand that physical disabilities don't limit other abilities.
- Employment resources and training to find jobs that interest them.

Other groups identified in single responses

- People with brain injury: This population is challenging to service because of multiple needs and issues. These individuals often need job coach opportunities and help finding the right job match.
- People with autism: This population needs pre-vocational skills training, and training on how to find and keep a job, including proper workplace behaviors.
- People with substance abuse disorder: This population needs for providers to learn the most up-to-date treatment issues for this population
- High school students with disabilities: This population needs VR services while in school, and more VR training before the student becomes an adult.
- People with disabilities who qualify for Medicaid or state funded services: This population includes the uninsured working poor. Such individuals may need more education to be able to apply for jobs that can be more rewarding. Individuals in this category who are ex-offenders may need to be able to clean up criminal records at times. They need counselors who will believe in their aptitude and connect them with resources.

The VR Needs of Individuals with Disabilities Served through other Components of the Statewide Workforce Investment System

State and Local Improvements Needed for Workforce Development System Integration and Accountability

This section is named after the title of a complete evaluation of North Carolina's entire workforce development system, which was published in March 2012 by the North Carolina General Assembly Program Evaluation Division. NC DHHS and DVRS participated in the evaluation at various stages. The full document is accessible online through the North Carolina General Assembly website:

http://www.ncga.state.nc.us/PED/Reports/documents/Workforce/WFD_Report.pdf.

The summary of the report's findings are that state and local program coordination of workforce programs have failed to create an integrated, effective workforce development system. Among its findings, the report notes that the services offered at local JobLink sites and level of integration varies across the state, and that the centers do not apply information technology to the extent available, and that despite investments in a data system to track participants, there are no statewide performance measures for the workforce development system. The recommendations were that the NC General Assembly should streamline the workforce development system, enhance accountability, strengthen the JobLink system (One-Stop Centers), require increased use of technology, and create a legislative oversight committee to oversee the reforms. These changes would benefit all job seekers, of which individuals with disabilities are a disadvantaged subgroup. The recommendation toward increased use of technology was said to be particularly applicable to North Carolinians with disabilities in making services more accessible. For example, in the report (p.25), a Workforce Solutions administrator explained that JobLinks were conceptualized as a physical location but that remote access could facilitate the virtual presence of specialized staff that do not need to be at JobLink full time for customers with disabilities, thereby avoiding the need for a return visit on a day when staff is on site.

North Carolina Common Follow-up System

An important recommendation of the above reference Workforce Development System evaluation report was to improve the NC Common Follow-up System (CFS), which is currently undergoing implementation. Most recently, NC DVRS had the opportunity to test the NC Tower, a portal to an application that provides

longitudinal information on labor market participation and earnings for individuals participating in a CFS program, such as the VR program. The testing, however, was limited to academic institutions, though it expected to be expanded to other programs during the next CSNA cycle.

The NC CFS is a database of the educational and employment outcomes of participants in publicly supported educational, employment, and training programs. The CFS was first developed in 1992 to longitudinally track the progress of workforce program participants, and has since been used to fulfill much of the collection, calculation, and reporting of performance and accountability measures for workforce training programs operated throughout the state, as mandated under the Workforce Investment Act of 1998.

North Carolina's workforce development system was streamlined to some extent in 2011 through a consolidation of many services delivered through Workforce Investment Act, Trade Adjustment Assistance, and Wagner-Peyser Act programs that are now administered through the NC Department of Commerce in collaboration with NC DHHS, the NC Community College System, the NC Department of Public Instruction, the NC Department of Public Safety, and other partner agencies.

State legislation passed in 2012 further reformed the NC workforce development system by expanding the oversight authority of the NC Commission on Workforce Development (the state Workforce Investment Board) to develop and evaluate performance measures for all workforce programs in the state, including the VR Program. Part of this legislation requires the Department of Commerce to enhance the Common Follow-up System and work in collaboration with the State Commission on Workforce Development to utilize data from the Common Follow-up System in the development of performance measures for North Carolina's Workforce Development System. These efforts are still in their preliminary stages and will be covered in more detail in the 2016 Comprehensive Statewide Needs Assessment.

The two tables show below include the number of VR Program consumers eligible for services with open and the number and proportion that were also served by at least one of the nine other participating entities that contribute to the Common Follow-up System. Data for the first table are released on an annual basis and provide the year-to-year change or trend. The second table shows the unduplicated total number of VR Program consumers and those served by at least one other participating entity over a five-year span to provide a big picture summary.

The first table shows a net 6.5% increase in the number of individuals served by the VR Program during an annual state fiscal cycle (SFY), from 57,473 in SFY 2009-10 to 61,207 in 2010-11. This increase is due to case accumulation and not to an increase in applications or newly active cases. To the contrary, there was a 5.4% net decrease in number of applications during this period, from 25,513 in SFY 2009-10 to 24,143 in 2011-12; and a 7.5% net decrease in newly signed individual plans for employment, from 14,620 in SFY 2009-10 to 13,528 in SFY 2011-12. With regard to change in the number of individuals served by the VR program and at least one other Common Follow-up System reporting entity, the percent of individuals served only by the VR Program declined from 62.7% in SFY 2009-10 to 59.7% in SFY 2011-12.

Over the past three state fiscal years (2010-2012), the proportion of VR consumers served by other workforce training programs has remained relatively consistent, with a three-year average of 60.8%: an average of 34.6% were served by one other agency or program; 16.9% by two other agencies or programs; and 9.3% by three or more other agencies or programs. Although there was a 6.5% net increase in the number of unduplicated individuals served by the VR program, from 57,473 in state fiscal year 2009-2010 to 61,207 in 2011-2012. The net increase in the number served by NC VR plus two other programs was 8.2%, from 9,809 in state fiscal year 2009-2010 to 10,600 in 2011-2012, and the net increase in the number served by three or more other programs was more than three times (204.5%), from 3,425 in state fiscal year 2009-2010 to 10,430 in 2011-2012. We also notice that during this three years period there was a net decrease in the number served by only one other program in addition to NC VR services and it was 32.3%, from 22,781 in state fiscal year 2009-2010 to 15,421 in 2011-2012. These double digit increases in multi-agency or multi-program participation may suggest a need for increased interagency collaboration towards identifying the service needs of participants.

Table 7. VR Program Consumers Served by Other Agencies in the NC CFS: 2010, 2011 & 2012

	SFY 2009-2010		SFY 2010-2011		SFY 2011-2012		Net Change (%)
	Count	%	Count	%	Count	%	
Total Unduplicated VR Consumers Eligible for Services	57,473	100	60,421	100	61,207	100	6.5
Number of Agencies Providing Services							
NC VR Program only	21,458	37.3	24,001	39.7	24,696	40.3	15.1
NC VR + 1 other agency	22,781	39.6	23,594	39.0	15,421	25.2	-32.3
NC VR + 2 other agencies	9,809	17.1	9,832	16.3	10,600	17.3	8.1
NC VR + 3 or more other agencies	3,425	6.0	2,994	5.0	10,430	17.0	204.5
Individuals Served by Each Agency							
JobLink Career Center	13,691	23.8	10,492	17.4	11,174	18.3	-18.4
Dept. of Public Safety, Division of Adult Correction	5,636	9.8	5,456	9.0	5,456	8.9	-3.2
Dept. of Labor	17	<0.1	10	<0.1	<10	<0.1	N/A
Dept. of Public Instruction	5,629	9.8	5,106	8.5	4,678	7.6	-16.9
Dept. of Health and Human Services, Division of Services for the Blind	64	0.1	76	0.1	67	0.1	4.7
Dept. of Health and Human Services, Division of Social Services	6,975	12.1	7,481	12.4	8,401	13.7	20.4
Dept. of Commerce, Division of Workforce Solutions	18,014	31.3	17,639	29.2	18,686	30.5	3.7
NC Community College System	14,023	24.4	14,545	24.1	14,700	24.0	4.8
University of North Carolina Constituent Universities	991	1.7	953	1.6	856	1.4	-13.6

Source: NC Department of Commerce, Labor and Economic Analysis Division

As the second table shows, of the nearly 118,714 individuals served by the VR program, in an eligible case status, 82% were provided services or participated in a program provided through another CFS agency. Nearly 1 in 5 VR consumers was served through the Division of Adult Corrections, which is slightly more than those in the Department of Public Instruction. More than half of VR Consumers are served through the Division of Workforce Solutions, and just under half receive services through the JobLink Career Center System, and just under half were enrolled in the NC Community College System. The need for collaboration in service provision is suggested by the volume of our VR consumers served through one or more of these other agencies.

Table 8. VR Consumers Served by Other Agencies in the NC CFS: 5-Year Total

Individuals Served by Each Agency, SFY 2007-2012			Number of Agencies Providing Service		
Agency	Individuals	Percent	Number of Agencies	Individuals	Percent
Dept. of Public Safety, Division of Adult Corrections	21,341	18.0%	NC VR Program only	21,311	18.0%
Dept. of Labor	157	0.1%	NC VR + 1 other agency	34,856	29.4%
Dept. of Public Instruction	20,106	16.9%	NC VR + 2 other agencies	33,487	28.2%
DHHS, Division of Services for the Blind	280	0.2%	NC VR + 3 or more other agencies	29,060	24.5%
DHHS, Division of Social Services	33,812	28.5%	Total Unique Individuals	118,714	100.0%
Dept. of Commerce, Division of Workforce Solutions	64,127	54.0%	Individuals Receiving Services through the JobLink Career Center System	54,210	45.7%
NC Community Colleges	54,073	45.5%			
UNC Constituent Universities	3,247	2.7%			

Source: NC Department of Commerce, Labor and Economic Analysis Division

Challenges the NC Workforce Development System on Whole Experiences When Fulfilling the Needs of Individuals with Disabilities

This section reprints the second component of the survey of Workforce Board Directors. The three survey items were:

- Identify challenges the NC Workforce Development System as a whole faces when fulfilling the needs of people with disabilities;
- Identify what they thought could be done to overcome these challenges;
- Identify what they thought NC DVRS and the State Rehabilitation Council could do to help in overcoming these challenges.

Table 9. Challenges and Solutions for the Workforce Development System

Challenges	Possible Solutions	What can VR and the SRC do?
Need more employers that are hiring, and overcoming employers' fears and concerns, along with the social stigma, that inhibits employers from hiring people with disabilities.	Continue to market our services. We need to re-educate employers on the advantages of hiring individuals with disabilities and ensure business outreach is conducted.	More staff and get more employers involved. Have more job developers working with employers. Increasing advertisements and media regarding the advantages and incentives for employers to hire people with disabilities, and build partnerships and train staff in the One Stop Centers.
Lack of education, awareness, funding, and a coordinated plan.	More coordination among state agencies.	Increase collaboration, education and outreach.
There is such a large range of disabilities that we could encounter and without being specialists or trained to identify and handle these disabilities; One Stop Career Centers are under-skilled at handling these situations. They may not even be able to identify that a client has a barrier to be able to refer to other agencies for support.	Have the state require training on disabilities for One Stop Career Center managers and staff members.	NC DVRS and the State Rehabilitation council could provide the training for One Stop Career Centers.

Assessing the Need to Establish, Develop, or Improve CRPs

The Community Rehabilitation Programs (CRPs) directly provide, or facilitate the provision of one or more vocational rehabilitation services to individuals with disabilities as one of their major functions. The purpose of these services is to enable those individuals to maximize their opportunities for employment. NC DVRS extends its services for people with disabilities through partnerships with the CRPs. The CRPs provide one or more of the following services to people with disabilities to help them prepare for and obtain employment: community-based assessment, vocational evaluation, work-adjustment training, supported employment, and job coaching. Toward the start of FFY 2013, NC DVRS held contracts or memoranda of agreement with 133 CRPs in 197 locations across the state. For an organization to become a CRP with NC DVRS, the organization must be accredited by the Commission on Accreditation of Rehabilitation Facilities (CARF), the Council on Accreditation (COA), or the Council on Quality Leadership (COL) in the area of service provision and adhere to criteria set forth in rules by the Division. CRPs are periodically reviewed by NC DVRS Regional CRP Specialists, which are located throughout the state. The NC DVRS directly administers two community rehabilitation programs WorkSource East in Goldsboro and WorkSource West in Morganton.

In FFY 2012, 10,399 consumers received services from a CRP, of which 4,382 (42%) received supported employment (SE) services. Of those provided CRP services that year, 2,502 achieved their employment objectives in the same year, including 1,023 individuals that were placed in employment in an integrated setting with supports, while many others continued to progress towards employment.

The mandated 34 CFR §361.29 requirement that the CSNA include an assessment of the need to establish, develop or improve Community Rehabilitation Programs (CRPs) is not satisfied by an individual, isolated activity. Rather, NC DVRS hold regularly scheduled NC DVRS/CRP Steering Committee meetings expressly for this purpose. Members include NC DVRS staff, including rehabilitation program specialists, office managers, the Chief Accountant for CRP services, and representatives from the NC DHHS Division of Mental Health, Developmental Disabilities, and Substance Abuse Services (MH/DD/SAS), and representatives from the CRP community appointed by NC DVRS, NC Association of People Supporting Employment First (APSE), and the NC Association of Rehabilitation Facilities (NCARF). The steering committee meets on a quarterly basis and focuses on budgetary and program issues and makes recommendations to the NC DVRS Director. The overall goal of the committee is to help ensure the delivery of quality services with informed choice by our consumers. The committee's goals and recommendations along with the Division Director's feedback are posted on the NC DVRS public web site.

Examples of activities carried out during the past three years included:

- Review and ongoing revisions to rules and standards, including qualifications standards for CRP staff providing or supervising direct services to consumer, which were developed to address the need for service quality and uniformity.
- The development of a new evaluation instrument to assist with monitoring the quality of services being provided by CRPs, and also address the need for service quality and uniformity.
- The development of a website specific to CRP resources, such as vendor applications and rules and standards, which now includes a description of the process for becoming an approved vendor. This was done to address the need to communicate this information and make it more accessible to the public. The website with this information is:
<http://www.ncdhhs.gov/dvrs/employ/rehab.htm>.
- An evaluation of fair rates and methods of compensation for CRPs and supporting activities such as transportation services provided to consumers, which addressed the need for fiscal responsibility in providing these services efficiently, yet fairly.
- The development of effective collaborative efforts with the NC DHHS-Division of Mental Health, Developmental Disabilities and Substance Abuse Services (DMHDDSAS) to provide consistent

funding for extended supported employment addressed the need for VR Program participants to receive follow-along services, even after their case was successfully closed.

- Information provided by CRPs and the steering committee was assimilated to help identify innovative activities and expansion projects using ARRA funding, including the maintenance of the CRP infrastructure during periods of high unemployment.

Milestone System

The most impactful changes with regard to the need to establish, develop or improve Community Rehabilitation Programs have so far resulted from a structured service delivery model that replaced the VR purchase of hourly-rate fee-for-services for work adjustment and supported employment with contracted outcome-based milestone system. Although some CRP services were already being purchased on performance-based contracts, most were not. The need for a milestone system arose from a combination of inconsistent or incomplete placement records for some providers; billing irregularities; feedback from VR staff on surveys pertaining to CRP services, the documentation and level of accountability required, and constraints on the resources required for monitoring and processing authorizations for hourly rate services. Having a milestone system was to address these issues: reduce billing irregularities, paperwork, and the need for documentation and monitoring, and to hold CRPs accountable for VR consumer outcomes.

Implementation of a milestone payment for work adjustment and supported employment job development and placement services was first initiated October 2012, following stakeholder input, internal cost analyses, and an evaluation of how other state VR programs had successfully implemented similar milestone payment systems.

Once the job development milestone was in place, a sample of 62 VR counselors who used CRP services were surveyed on their level of understanding of VR policy as it pertained to the CRP services. Of the 62 respondents, 23 (37%) indicated that they have excellent understanding while 36 (58%) indicated they had a good understanding, and 3 (5%) indicated an average understanding. In this survey, the counselors were asked about their current training needs as related to different CRP services categories, and about 24% indicated that they need training in policy and procedures; 21% said that they need training in follow-along services; and 19% wanted to have training in job development. Individual responses also indicated that NC DVRS should have more qualified staff working with the CRP so they can stay abreast of changes and the need for their services, and that there was a communication gap between the CRP and NC DVRS. Regarding their relationship with the CRPs in their catchment area 40% indicated that they have “excellent” relationship with the CRPs while 48% rated “good” relationship. This study resulted in the greater clarification of policies, a practice that carried over to the full implementation of the milestone system.

The complete milestone payment system for SE and work adjustment services was developed collaboratively with CRPs through the CRP Steering Committee and became effective November 1, 2013. As applicable, there are payments at the point of intake; for supplemental evaluation; job development and retention; training and stabilization; and successful case closure after at least 90 days employment. Evaluations of the new milestone payment system as it pertains to the need to establish, develop, or improve community rehabilitation programs will continue through the next CSNA cycle.

Individual Placement and Supports (IPS)

Another recent initiative is the Individual Placements and Supports (IPS) model of supported employment for individuals with serious mental illness (SMI), serious persistent mental illness (SPMI) and co-occurring disorders. Research into this model began in July 2012 and initiated discussions to become a part of Dartmouth Psychiatric Research Center’s IPS learning collaborative. In August 2012, the *Transitions to Community Living* (TCL), the US Department of Justice (DOJ) Settlement Agreement with North Carolina, further established that people with SMI must be provided evidenced-based practice Supported Employment services. The Dartmouth research on IPS shows that implementing IPS to fidelity doubles the number of people in competitive employment at a rate of up to 60%, and the initiative is expected to provide NC additional resources to help overcome some of the barriers to employment for individuals with SMI and increase their participation in the labor market. The between NC DVRS and DMHDDSAS for collaboration for its implementation began in July 2013.

DMHDDSAS is the agency responsible for the Long Term Vocational Supports (LTVS), which provides assistance with maintaining a job for participants, age 16 and over, who no longer need the intense level of Supported Employment Services. LTVS are provided because of specific needs of the consumer, including medical and behavioral needs, and supports regarding the social or environmental issues that are a part of successful employment.

North Carolina's state definition of supported employment (SE) is now based on the SE-IPS model, and SE/Behavioral Health providers that have since signed contracts with their Local Management Entity/Managed Care Organization (LME/MCO) will be providing the IPS model of evidence-based SE as part of the TCL/DOJ initiative. These include the more than 130 VR supported employment providers throughout North Carolina.

There will be an ongoing assessment of the impact of the IPS model, and all sites providing evidence-based SE will be evaluated with a research-based fidelity measure, and will receive a rating and quality improvement report, not duplicative of monitoring; meaning that for the next needs assessment, VR will know the level of fidelity each site as implemented to guide further training, technical assistance, and quality improvement measures, and will be able to quantify the number of CRPs providing evidence-based supported employment to people with serious- or severe and persistent mental illness.

Attachment 4.11(b) Annual Estimates

- Identify the number of individuals in the state who are eligible for services.
- Identify the number of eligible individuals who will receive services provided with funds under:
 - Part B of Title I;
 - Part B of Title VI;
 - each priority category, if under an order of selection.
- Identify the cost of services for the number of individuals estimated to be eligible for services. If under an order of selection, identify the cost of services for each priority category.

Division's Response

NC DVRS estimates **59,250** individuals with a disability who have been determined eligible for VR services will be in-service with the VR program during federal fiscal year 2015. This estimate includes (a) cases where *purchased* services were provided in accordance with the consumer's individualized plan for employment; (b) cases where *purchased* services were provided toward the development of the consumer's individualized plan for employment (e.g., diagnostic and assessment services provided by a community rehabilitation program); and (c) cases where *non-purchased* services were provided (e.g., vocational counseling and evaluations provided by NC DVRS staff).

Of this population of 59,250 individuals determined eligible for VR services, NC DVRS estimates a subgroup of **29,500** individuals will receive direct cost services provided with funds under Part B of Title I during the fiscal year.

For federal fiscal year 2015, NC DVRS estimates total service expenditures of approximately **\$118,762,308**. This includes administrative costs, counseling and placement, and all purchased services, including supported employment provided under the Title VI-B.

NC DVRS does not expect to implement an order of selection process during federal fiscal year 2015. Services will be available for all client service categories.

In federal fiscal year 2014, NC DVRS paid for **3,979** individuals to receive supported employment (SE) services at total cost of **\$7,776,314** and an average cost of about **\$1,950** per case. For federal fiscal year 2015 an estimated **4,000** individuals with most significant disabilities (MSD) will receive supported employment services funded through Title VI Part B supplemental grant (**\$587,032**) and Title I Part B (basic support grant), for a projected total cost estimate of **\$8,000,000**.

Category	Title I or Title VI	Estimated Funds	Estimated Number to be Served	Average Cost of Services
Title I (Except Supported Employment)	Title I	\$110,762,308	55,250	\$2,005
Title VI SE Grant + Title I Supported Employment	Title VI	\$8,000,000	4,000	\$2,000
				—
Totals		\$118,762,308	59,250	\$2,004

Attachment 4.11(c)(1) State Goals and Priorities

The goals and priorities are based on the comprehensive statewide assessment, on requirements related to the performance standards and indicators, and on other information about the state agency. (See section 101(a)(15)(C) of the Act.) This attachment should be updated when there are material changes in the information that require the description to be amended.

- Identify if the goals and priorities were jointly developed and agreed to by the state VR agency and the State Rehabilitation Council, if the state has a council.
- Identify if the state VR agency and the State Rehabilitation Council, if the state has such a council, jointly reviewed the goals and priorities and jointly agreed to any revisions.
- Identify the goals and priorities in carrying out the vocational rehabilitation and supported employment programs.
- Ensure that the goals and priorities are based on an analysis of the following areas:
 - the most recent comprehensive statewide assessment, including any updates;
 - the performance of the state on standards and indicators; and
 - other available information on the operation and effectiveness of the VR program, including any reports received from the State Rehabilitation Council and findings and recommendations from monitoring activities conducted under section 107.

The following goals and priorities of the Division are developed in collaboration with the State Rehabilitation Council, along with input gathered through the comprehensive statewide needs assessment process spanning federal fiscal years 2014 through 2017, public input, and internal organizational needs assessment and planning processes for purposes of effectively carrying out the vocational rehabilitation and supported employment programs. In addition, the priorities and goals established support improved performance on standards and indicators.

Priority 1. Improve Client Outcomes

Goal 1.1. Increase the number and proportion of individuals exiting the VR program in employment after services were provided under an individualized plan for employment.

- **Objective 1.1.1.** The total number of individuals exiting the VR program in employment will exceed that of the prior year.
- **Objective 1.1.2.** Increase the rehabilitation rate for individuals exiting the VR program after receiving services under an individualized plan for employment from 50.4% in FFY 2013 to 55.8% in FFY 2017.

Goal 1.2. Increase the number and proportion of individuals with significant or most significant disabilities exiting the VR program in employment after services were provided under an individualized plan for employment.

- **Objective 1.2.1.** Maintain that at least 75% of VR consumers who achieved competitive employment will be individuals with significant or most significant disabilities. (RSA standard = 62.4%)

Goal 1.3. Increase earnings for individuals exiting the VR program in employment.

- **Objective 1.3.1.** Increase average hourly earnings for individuals who exit the VR program in competitive employment from 48% the statewide average for all North Carolinians in FFY 2013 to at least 52% in FFY 2017.
- **Objective 1.3.2.** Increase the proportion of clients exiting the VR Program in competitive employment whose own income is their primary source of support at closure compared to the

percentage whose own income is the primary source of support when they applied for VR services from 62.7% in FFY 2013 to at least 65% in FFY 2017. (RSA standard = 53%)

Priority 2. Improve Outcomes for Minorities and Populations Identified as Underserved or Hard to Place in Employment

Goal 2.1. Increase the number and proportion of individuals with *mental illness* and *substance abuse disorder* exiting the VR program in employment after services were provided under an individualized plan for employment.

- **Objective 2.1.1.** The total number of individuals with mental illness exiting the VR program in employment will exceed that of the prior year.
- **Objective 2.1.2.** Increase the rehabilitation rate for individuals with mental illness exiting the VR program after receiving services under an individualized plan for employment from 47.7% in FFY 2013 to 52% in FFY 2017.

Goal 2.2. Increase the number and proportion of individuals with *most significant disabilities* exiting the VR program in employment after services were provided under an individualized plan for employment.

- **Objective 2.2.1.** The total number of individuals with most significant disabilities exiting the VR program in employment will exceed that of the prior year.
- **Objective 2.2.2.** Increase the rehabilitation rate for individuals with most significant disabilities exiting the VR program after receiving services under an individualized plan for employment from 44.8% in FFY 2013 to 50% in FFY 2017.

Goal 2.3. Increase the number and proportion of individuals with disabilities of *minority racial backgrounds* exiting the VR program in employment after services were provided under an individualized plan for employment.

- **Objective 2.3.1.** The total number of individuals with disabilities of minority racial backgrounds exiting the VR program in employment will exceed that of the prior year.
- **Objective 2.3.2.** Increase the rehabilitation rate for individuals with disabilities of minority racial backgrounds exiting the VR program after receiving services under an individualized plan for employment from 50.1% in FFY 2013 to 55.8% in FFY 2017.

Goal 2.4. Increase the number and proportion of individuals with disabilities with *criminal backgrounds* exiting the VR program in employment after services were provided under an individualized plan for employment.

- **Objective 2.4.1.** Increase the rehabilitation rate for individuals with disabilities and criminal backgrounds exiting the VR program after receiving services under an individualized plan for employment from 47% in FFY 2013 to 52% in FFY 2017.

Priority 3. Increase Client Satisfaction

Goal 3.1. Increase client satisfaction with their counselor's understanding of their VR needs.

- **Objective 3.1.1.** Increase the percent of clients who are satisfied or very satisfied with their counselor's understanding of their VR needs from 84.7% in FFY 2013 to 90% in FFY 2017.

Goal 3.2. Increase client satisfaction with their counselor in terms of being easy to contact.

- **Objective 3.2.1.** Increase the percent of clients who are satisfied or very satisfied that their counselor was easy to contact from 86.0% in FFY 2013 to 90% in FFY 2017.

Goal 3.3. Increase client satisfaction with their counselor in terms of *working with them as an equal partner*.

- **Objective 3.3.1.** Increase the percent of clients who are satisfied or very satisfied that their counselor worked with them as an equal partner from 85.3% in FFY 2013 to 88% in FFY 2017.

Goal 3.4. Increase client satisfaction with their counselor in terms of *offering options that meet their work-related needs*.

- **Objective 3.4.1.** Increase the percent of clients who are satisfied or very satisfied that their counselor offered options that met their work-related needs from 79.9% in FFY 2013 to 84% in FFY 2017.

Goal 3.5. Increase client satisfaction with their *level of involvement* in their VR program.

- **Objective 3.5.1.** Increase the percent of clients who are satisfied or very satisfied with their level of involvement in their VR program from 81.5% in FFY 2013 to 85% in FFY 2017.

Goal 3.6. Increase client satisfaction with *response time for services* provided by VR staff.

- **Objective 3.6.1.** Increase the percent of clients who rate the response time for services provided by VR staff as *above average* or *excellent* from 63.4% in FFY 2013 to 67% in FFY 2017.

Goal 3.7. Increase client satisfaction with their *overall experience* with the VR program.

- **Objective 3.7.1.** Increase the percent of clients who rate their overall experience with the VR program as *above average* or *excellent* from 66.3% in FFY 2013 to 71% in FFY 2017.

Attachment 4.11(c)(3) Order of Selection

- Identify the order to be followed in selecting eligible individuals to be provided vocational rehabilitation services.
- Identify the justification for the order.
- Identify the service and outcome goals.
- Identify the time within which these goals may be achieved for individuals in each priority category within the order.
- Describe how individuals with the most significant disabilities are selected for services before all other individuals with disabilities.

This agency is not implementing an Order of Selection.

Attachment 4.11(c)(4) Goals and Plans for Distribution of Title VI, Part B Funds

Specify the state's goals and priorities with respect to the distribution of funds received under section 622 of the Act for the provision of supported employment services.

Title VI, Part B funds are distributed to supported employment programs with the North Carolina Division of Vocational Rehabilitation Services (The Division). These community rehabilitation programs provide services to consumers with severe and persistent mental illness, mental retardation, traumatic head injury, autism, cerebral palsy, and other developmental disabilities. In addition, other eligible individuals determined to be most significantly disabled, and who require intensive training and long-term support (extended services) in order to obtain and maintain successful employment outcome are also served. The Division annually serves approximately 4,000 consumers with the most significant disabilities within the supported employment (SE) program. The goals and priorities for the distribution of funds received under Section 622 of the Act are to promote the expansion of new supported employment programs and to address the unmet and underserved areas of the state as it relates to supported employment services by the expansion of new programs where needed. More specifically, goals for the supported employment program for FFY 2015 include:

Supported Employment Goal 1: Increase the number of individuals with most significant disabilities who receive supported employment services.

Supported Employment Goal 2: Identify and begin implementing practices that can increase the successful closure rate of individuals receiving supported employment services.

Supported Employment Goal 3: Fully implement a performance-based milestone payment system focusing on outcomes versus process to produce quality, meaningful employment outcomes for consumers requiring supported employment services.

Supported Employment Goal 4: Support increased training/qualification requirements for job coaches and their supervisory staff. Collaboratively increase supported employment training to NC DVRS rehabilitation counselors and Community Rehabilitation Program direct service staff.

Supported Employment Goal 5: Continue collaboration with the Division of Mental Health/Developmental Disabilities/Substance Abuse Services to optimize coordination of services at the local service level to improve ease of service access for consumers requiring supported employment services.

Supported Employment Goal 6: Collaborate with the Division of Mental Health/Developmental Disabilities/Substance Abuse Services with the implementation of the Individual Placement and Support Model of Supported Employment.

Supported Employment Goal 7: Collaborate with the Division of Mental Health/Developmental Disabilities/Substance Abuse Services in developing a funding mechanism that utilizes supported employment dollars from Vocational Rehabilitation, state funds from the Local Management Entities, and Medicaid dollars from the Managed Care Organizations to fund supported employment for those needing the individual placement and support model of supported employment.

Supported Employment Goal 8: Collaborate with the Division of Mental Health/Developmental Disabilities/Substance Abuse Services in training Vocational Rehabilitation field staff as well as Community Rehabilitation Program providers in the Individual Placement and Support Model of Supported Employment.

Supported Employment Goal 9: Collaborate with the Division of Mental Health/Developmental Disabilities/Substance Abuse Services in fidelity reviews of providers who contract to provide the Individual Placement and Support Model of Supported Employment.

Supported Employment Goal 10: Collaborate with the Division of Mental Health/Developmental Disabilities/Substance Abuse Services in increasing pilot sites across the state to be a part of the Individual Placement and Support Model of Supported Employment research grant through the Johnson & Johnson Dartmouth Community Mental Health Program.

Supported Employment Goal 11: Develop supported employment contracts with all community rehabilitation programs that are pilot sites for the Johnson and Johnson Dartmouth Community Mental Health Program grant for the Individual Placement and Support Model of Supported Employment.

Attachment 4.11(d) State's Strategies

This attachment should include required strategies and how the agency will use these strategies to achieve its goals and priorities, support innovation and expansion activities, and overcome any barriers to accessing the vocational rehabilitation and the supported employment programs. (See sections 101(a)(15)(D) and (18)(B) of the Act and Section 427 of the General Education Provisions Act (GEPA)).

Describe the methods to be used to expand and improve services to individuals with disabilities.

Division's Response:

A. Establishment of Goals and Priorities and How the Strategies and Substrategies Interrelate and Support their Achievement:

Following a thorough analysis of the results of the 2013 Statewide Comprehensive Needs Assessment, the Division and its SRC, jointly established the prioritized goals below for the period 2015-17:

Priority 1. Improve Client Outcomes

Goal 1.1. Increase the number and proportion of individuals exiting the VR program in employment after services were provided under an individualized plan for employment.

- **Objective 1.1.1.** The total number of individuals exiting the VR program in employment will exceed that of the prior year.
- **Objective 1.1.2.** Increase the rehabilitation rate for individuals exiting the VR program after receiving services under an individualized plan for employment from 50.4% in FFY 2013 to 55.8% in FFY 2017.

Goal 1.2. Increase the number and proportion of individuals with significant or most significant disabilities exiting the VR program in employment after services were provided under an individualized plan for employment.

- **Objective 1.2.1.** Maintain that at least 75% of VR consumers who achieved competitive employment will be individuals with significant or most significant disabilities. (RSA standard = 62.4%)

Goal 1.3. Increase earnings for individuals exiting the VR program in employment.

- **Objective 1.3.1.** Increase average hourly earnings for individuals who exit the VR program in competitive employment from 48% the statewide average for all North Carolinians in FFY 2013 to at least 52% in FFY 2017.
- **Objective 1.3.2.** Increase the proportion of clients exiting the VR Program in competitive employment whose own income is their primary source of support at closure compared to the percentage whose own income is the primary source of support when they applied for VR services from 62.7% in FFY 2013 to at least 65% in FFY 2017. (RSA standard = 53%)
 - **Strategy 1.1.** Develop and maintain effective working relationships with businesses in a variety of industries across the state directly and through expanding participation in forums to include US and NC Business Leadership Networks, The Net, local chambers of commerce, and local chapters of Society of Human Resource Managers, and local workforce development partners. Support information sharing and talent pool exchanges such as the Talent Acquisition Portal.
 - **Strategy 1.2.** Equip and train Counselors, Vocational Evaluators and Business Relations Representatives to better identify the workforce needs of businesses and accurately meet them.

- **Strategy 1.3.** Expand and improve job development, placement and employment as recommended in the Comprehensive Statewide Needs Assessment.
- **Strategy 1.4.** Increase consumer participation in on-the-job training services, internships, and apprenticeships.
- **Strategy 1.5.** Coordinate efforts at the state, regional, and local level to improve work-related transportation options for consumers and awareness of existing options.
- **Strategy 1.6.** Increase access to and understanding of caseload and local/regional labor market data and how it can be used to improve outcomes.
- **Strategy 1.7.** Increase knowledge and understanding of VR and its services through systematic outreach to groups such as referral sources, employers, consumers, advocates, school systems, and workforce development partners.

Priority 2. Improve Outcomes for Minorities and Populations Identified as Underserved or Hard to Place in Employment

Goal 2.1. Increase the number and proportion of individuals with *mental illness* and *substance abuse disorder* exiting the VR program in employment after services were provided under an individualized plan for employment.

- **Objective 2.1.1.** The total number of individuals with mental illness exiting the VR program in employment will exceed that of the prior year.
- **Objective 2.1.2.** Increase the rehabilitation rate for individuals with mental illness exiting the VR program after receiving services under an individualized plan for employment from 47.7% in FFY 2013 to 52% in FFY 2017.

Goal 2.2. Increase the number and proportion of individuals with *most significant disabilities* exiting the VR program in employment after services were provided under an individualized plan for employment.

- **Objective 2.2.1.** The total number of individuals with most significant disabilities exiting the VR program in employment will exceed that of the prior year.
- **Objective 2.2.2.** Increase the rehabilitation rate for individuals with most significant disabilities exiting the VR program after receiving services under an individualized plan for employment from 44.8% in FFY 2013 to 50% in FFY 2017.
 - **Strategy 2.1.** Continue collaborations with programs and partners to implement evidence-based practices that will increase employment outcomes for individuals with mental illness and substance disorder, including the Individual Placements and Supports (IPS) model, as appropriate.

Goal 2.3. Increase the number and proportion of individuals with disabilities of *minority racial backgrounds* exiting the VR program in employment after services were provided under an individualized plan for employment.

- **Objective 2.3.1.** The total number of individuals with disabilities of minority racial backgrounds exiting the VR program in employment will exceed that of the prior year.
- **Objective 2.3.2.** Increase the rehabilitation rate for individuals with disabilities of minority racial backgrounds exiting the VR program after receiving services under an individualized plan for employment from 50.1% in FFY 2013 to 55.8% in FFY 2017.
 - **Strategy 2.2.** Increase cultural competence among staff, methods and resources that can help staff to effectively reach and serve individuals with disabilities of minority backgrounds and/or Hispanic ethnicity who qualify for VR services.

- **Strategy 2.3.** Encourage hiring of Spanish speaking staff members in areas with high concentrations of people of Hispanic ethnicity.

Goal 2.4. Increase the number and proportion of individuals with disabilities with *criminal backgrounds* exiting the VR program in employment after services were provided under an individualized plan for employment.

- **Objective 2.4.1.** Increase the rehabilitation rate for individuals with disabilities and criminal backgrounds exiting the VR program after receiving services under an individualized plan for employment from 47% in FFY 2013 to 52% in FFY 2017.
 - **Strategy 2.3.** Partner with agencies, including NC Division of Adult Correction and Juvenile Justice, associations, and employers to develop viable pathways to employment for consumers with criminal backgrounds.
 - **Strategy 2.4.** Identify and apply current best practices that will increase employment success of individuals with disabilities transitioning from a corrections environment or have experienced difficulties obtaining employment because of previous convictions.

Priority 3. Increase Client Satisfaction

Goal 3.1. Increase client satisfaction with their counselor's understanding of their VR needs.

- **Objective 3.1.1.** Increase the percent of clients who are satisfied or very satisfied with their counselor's understanding of their VR needs from 84.7% in FFY 2013 to 90% in FFY 2017.

Goal 3.2. Increase client satisfaction with their counselor in terms of being easy to contact.

- **Objective 3.2.1.** Increase the percent of clients who are satisfied or very satisfied that their counselor was easy to contact from 86.0% in FFY 2013 to 90% in FFY 2017.

Goal 3.3. Increase client satisfaction with their counselor in terms of *working with them as an equal partner*.

- **Objective 3.3.1.** Increase the percent of clients who are satisfied or very satisfied that their counselor worked with them as an equal partner from 85.3% in FFY 2013 to 88% in FFY 2017.

Goal 3.4. Increase client satisfaction with their counselor in terms of *offering options that meet their work-related needs*.

- **Objective 3.4.1.** Increase the percent of clients who are satisfied or very satisfied that their counselor offered options that met their work-related needs from 79.9% in FFY 2013 to 84% in FFY 2017.

Goal 3.5. Increase client satisfaction with their *level of involvement* in their VR program.

- **Objective 3.5.1.** Increase the percent of clients who are satisfied or very satisfied with their level of involvement in their VR program from 81.5% in FFY 2013 to 85% in FFY 2017.

Goal 3.6. Increase client satisfaction with *response time for services* provided by VR staff.

- **Objective 3.6.1.** Increase the percent of clients who rate the response time for services provided by VR staff as *above average* or *excellent* from 63.4% in FFY 2013 to 67% in FFY 2017.

Goal 3.7. Increase client satisfaction with their *overall experience* with the VR program.

- **Objective 3.7.1.** Increase the percent of clients who rate their overall experience with the VR program as *above average* or *excellent* from 66.3% in FFY 2013 to 71% in FFY 2017.
 - **Strategy 3.1.** Identify areas where improved customer friendly practices are needed.
 - **Strategy 3.2.** Improve consumers' understanding of the rehabilitation process with emphasis on the eligibility determination process, comprehensive assessment, and plan development.

- **Strategy 3.3.** Improve use of methods and techniques to improve the active management of eligibility determination timelines.
- **Strategy 3.4.** Investigate, develop and expand methods to effectively maintain contact between service staff and consumers while protecting consumers' privacy.
- **Strategy 3.5.** Optimize policies, rules, processes, and related aides for ease of use for improved delivery of services, including rehabilitation technology services.
- **Strategy 3.6.** Increase the amount and quality of information available through the Division's online presence.

Requirement:

Identify how a broad range of assistive technology services and assistive technology devices will be provided to individuals with disabilities at each stage of the rehabilitation process; and describe how assistive technology services and devices will be provided to individuals with disabilities on a statewide basis.

Division's Response

Assistive Technology services and devices are provided to eligible individuals statewide who require them. Rehabilitation technology and assistive technology services are sponsored and provided to the degree necessary to complete the rehabilitation program. Included are services and devices which can supplement and enhance an individual's functions such as adapted computer access, augmentative communication, specialized seating and mobility, vehicle modifications, and services which can have an impact on the environment, such as accessibility, job re-design, work site modification and residence modification. Application of the available engineering and assistive technology services and technologies is important when making determinations of eligibility particularly for individuals with significant and most significant disabilities. Rehabilitation engineering evaluations and services are not subject to an individual's financial eligibility; however, devices, equipment and modifications recommended by the engineer are subject to financial eligibility. Applicants during the assessment phase, and consumers determined to be eligible for services in need of and who can benefit from rehabilitation engineering services, devices and assistive technology services can be referred to providers of these services, and these services can assist with assessment processes. Presently within the state, these services are made available statewide through the Division's 17 Rehabilitation Engineers in addition to 14 Assistive Technology Consultants, a Funding Specialist, and a Consumer AT Resource/Information Specialist, Program Director, Vehicle Modification Engineer, and Program Specialist for Rehabilitation Technology, all of which comprise the Division's NC Rehabilitation Technology Program. Additional assistive technology services are available through outside Assistive Technology Suppliers and Providers.

The Division is fortunate to have the North Carolina Assistive Technology Program as a vital program component. The program increases access and the provision of services to individuals served within the VR program and supports the Division mission of increasing independence for clients in the home, post-secondary school and work setting. In addition, this affords clients of the Division with fast access to the programs array of services which includes: technical expertise in selecting the most appropriate device; hands-on demonstration and try-out of low tech and high tech devices for people with disabilities; information on a variety of technology options; funding resource information and strategies; short-term loan of equipment to consumers, families and professionals who serve them; training to consumers, families and professionals; technical assistance to local organizations, schools, and programs to expand assistive technology local service delivery capacity; awareness and outreach activities to inform the public about equipment and devices people with disabilities can use for greater independence.

Requirement:

Identify what outreach procedures will be used to identify and serve individuals with disabilities who are minorities, including those with the most significant disabilities; and what outreach procedures will be used to identify and serve individuals with disabilities who have been unserved or underserved by the VR program.

Division's Response:

The Division employs several strategies to increase outreach activities to various minority groups with the goal of also reaching those individuals with the most significant disabilities. The major thrust of activities is to go where the minority individuals and groups are contrasted with expecting them to come to Vocational Rehabilitation or to know how to access services without assistance. Management and staff on the local, regional, and state levels continue to identify minority or ethnic groups in their community along with identifying group leaders, common meeting places, preferred ways for accessing information, and neighborhood/community resources that can be used and developed to bring rehabilitation services to more minority individuals with the most significant disabilities.

As there are numerous diverse cultures throughout North Carolina, staff are encouraged to concentrate on the groups in their particular area. The specific groups of considerable interest include: North Carolina Native Americans, Hispanic/Latino populations, African and Asian populations. The Division has created a staff position that is dedicated to developing and furthering initiatives for outreach to Hispanic/Latino populations. This individual routinely travels to the communities where there are high concentrations of the targeted populations and provides marketing information to their meetings and carnivals. The Division also has active program specialists who provide outreach to advocacy organizations serving individuals in the following areas: Mental Illness and Substance abuse, Disabled Veterans, Developmental Disabilities, Traumatic Brain Injuries, and Deaf/Communication Disorders.

Specific Objectives and Strategies Pertaining to these activities are included within the State Plan Goals effective FFY 2015-2017:

Priority 2. Improve Outcomes for Minorities and Populations Identified as Underserved or Hard to Place in Employment

Goal 2.1. Increase the number and proportion of individuals with *mental illness* and *substance abuse disorder* exiting the VR program in employment after services were provided under an individualized plan for employment.

- **Objective 2.1.1.** The total number of individuals with mental illness exiting the VR program in employment will exceed that of the prior year.
- **Objective 2.1.2.** Increase the rehabilitation rate for individuals with mental illness exiting the VR program after receiving services under and individualized plan for employment from 47.7% in FFY 2013 to 52% in FFY 2017.

Goal 2.2. Increase the number and proportion of individuals with *most significant disabilities* exiting the VR program in employment after services were provided under an individualized plan for employment.

- **Objective 2.2.1.** The total number of individuals with most significant disabilities exiting the VR program in employment will exceed that of the prior year.
- **Objective 2.2.2.** Increase the rehabilitation rate for individuals with most significant disabilities exiting the VR program after receiving services under and individualized plan for employment from 44.8% in FFY 2013 to 50% in FFY 2017.
 - **Strategy 2.1.** Continue collaborations with programs and partners to implement evidence-based practices that will increase employment outcomes for individuals with mental illness and substance disorder, including the Individual Placements and Supports (IPS) model, as appropriate.

Goal 2.3. Increase the number and proportion of individuals with disabilities of *minority racial backgrounds* exiting the VR program in employment after services were provided under an individualized plan for employment.

- **Objective 2.3.1.** The total number of individuals with disabilities of minority racial backgrounds exiting the VR program in employment will exceed that of the prior year.

- **Objective 2.3.2.** Increase the rehabilitation rate for individuals with disabilities of minority racial backgrounds exiting the VR program after receiving services under and individualized plan for employment from 50.1% in FFY 2013 to 55.8% in FFY 2017.
 - **Strategy 2.2.** Increase cultural competence among staff, methods and resources that can help staff to effectively reach and serve individuals with disabilities of minority backgrounds and/or Hispanic ethnicity who qualify for VR services.
 - **Strategy 2.3.** Encourage hiring of Spanish speaking staff members in areas with high concentrations of people of Hispanic ethnicity.

Goal 2.4. Increase the number and proportion of individuals with disabilities with *criminal backgrounds* exiting the VR program in employment after services were provided under an individualized plan for employment.

- **Objective 2.4.1.** Increase the rehabilitation rate for individuals with disabilities and criminal backgrounds exiting the VR program after receiving services under and individualized plan for employment from 47% in FFY 2013 to 52% in FFY 2017.
 - **Strategy 2.3.** Partner with agencies, including NC Division of Adult Correction and Juvenile Justice, associations, and employers to develop viable pathways to employment for consumers with criminal backgrounds.
 - **Strategy 2.4.** Identify and apply current best practices that will increase employment success of individuals with disabilities transitioning from a corrections environment or have experienced difficulties obtaining employment because of previous convictions.

Requirement:

If applicable, identify plans for establishing, developing, or improving community rehabilitation programs within the state.

Division's Response:

The Division continues to utilize two advisory workgroups or committees comprised of supported employment, other community rehabilitation program providers along with Division staff as an effective method to identify and update the needs, goals, and priorities as they pertain to community rehabilitation programs. This group annually establishes goals and makes recommendations to the NC DVRS Director regarding the directions in which the community rehabilitation programs should continue to develop and grow. Another venue that has effectively promoted healthy dialog between the community rehabilitation programs and the Division is the regional CRP summit. Typically annually or semi-annually, as funding permits, regional summits are held where training and discussion of topics of mutual interest to both the CRP community and the Division.

Community rehabilitation programs are evaluated annually by the Division's local, regional, and state management in order to determine the appropriate level of service outcomes for purchase for the next funding cycle. The decision is based primarily upon need of consumers and availability of financial resources. The programs are also evaluated annually by the Division's local, regional, and state management relative to program capital and staffing needs for new and innovative programs. Priorities are developed and many of these needs are met through the Establishment Authority (the authority which makes funds available for the establishment of community rehabilitation programs) contingent upon the Division having funds available to do so.

The need for new community rehabilitation programs is also assessed continually, with special emphasis as part of the comprehensive statewide needs assessment process. New community rehabilitation programs are created, at least in part, to assist the Division in meeting identified needs and are typically generated through local and sometimes legislative initiatives. In these cases, the Division can help expand and improve the programs through establishment projects as funds permit.

One important activity the Division is currently working on which will launch during FFY 2014 is migrating from older legacy systems to a new electronic case management system which will require a lot of effort on behalf of the Division's fiscal and program staff, community rehabilitation program representatives, and developers. The Division is looking to make the process of receiving documentation and invoicing for services as paperless as possible.

Requirement:

Describe strategies to improve the performance of the state with respect to the evaluation standards and performance indicators.

Division's Response:

At this time, the Division has met all primary and secondary indicators with the exception of Indicator 1.5 the ratio of the hourly wages of those successfully exiting the NC DVRS program to the NC average hourly wage for all employed individuals.

The Division realizes that in order to perform better on this indicator, it must help consumers to prepare higher paying positions, typically obtained through increased education, specifically through more individuals successfully completing their post-secondary degrees, then following through with jobs that match their employment potential. It is currently looking for ways to adjust its programs, services, and supports to accomplish this in a fiscally-responsible manner.

Further, the Division's commitment to this issue is reflected in the elevated standing of importance that obtaining quality jobs for its consumers has and has made pursuit of this goal/priority 1: Employment Outcomes: Increase quantity and quality of employment outcomes of individuals with disabilities, particularly individuals with significant/most significant disabilities through a dual customer approach. Beyond increasing consumers' participation in career-oriented post-secondary education/training, some of the other strategies that the Division has established under this goal are to develop and build quality relationships with businesses that offer strong salaries and benefits and to continue offering the internship services, which, compared to an OJT experience, are geared more toward individuals who have completed their specialized training and need work experience to get their careers established. This service has been very well received by staff and consumers and we expect to continue the service.

Another strategy that the Division is employing to increase the earning potential of individuals who have entrepreneurial skills is through the support the Division has made available through a dedicated Small Business Specialist on staff who helps support staff and consumers in their assessment of this option as a fit and when it is mutually determined as such, coordination of local resources and ongoing supports for the consumer pursuing this option.

In December, 2012, the Division applied for and was awarded a grant opportunity to participate in a Learning Collaborative Research Grant that is being conducted and coordinated by the Institute for Community Inclusion, Inc. out of University of Massachusetts-Boston and is NIDRR-funded. The Division submitted a proposal to focus on strategies that can be employed to increase the average hourly wage in two offices within the Western region with different economic climates and resources. Asheville, which is the larger economic environment, will employ different strategies and approaches to the Forest City office, which is largely manufacturing-based and rural. The project concluded in February, 2014. Successful strategies will be reviewed to determine which may have application to other economic areas served by the Division. The information is shared with other VR programs through regular collaborative sessions.

Requirement:

Describe strategies for assisting other components of the statewide workforce investment system in assisting individuals with disabilities.

Division's Response:

NC DVRS has relatively strong ties with other components of the statewide workforce investment system. The partnerships and linkages that were established prior to the provisions of the Rehabilitation Act amendments of 1998 have served as a stable and effective foundation for effective service delivery.

Cooperative agreements or memorandum of agreements have been established with all local area workforce boards. The agreements provide for the following strategies:

Provision of inter-component staff training and technical assistance with regard to:

- the availability and benefits of, and information on eligibility standards for vocational rehabilitation services; and
- the promotion of equal, effective, and meaningful participation by individuals with disabilities receiving workforce development system services in all of the states JobLink Career Centers in the state through the promotion of accessibility; the use of non-discriminatory policies and procedures; the provision of reasonable accommodations; auxiliary aids and services, and rehabilitation technology for persons with disabilities.

Identification of service delivery strategies by the Division within the JobLink Career Centers and other components of the workforce development system.

Development and implementation of information systems that link all components of the statewide workforce development system; that link the components to other electronic networks including non-visual electronic networks; and that relate to such subjects as employment statistics and information on job vacancies, career planning, and workforce development activities.

Further development and use of customer service features such as common intake and referral procedures when feasible, customer databases, resource information, and human services hotlines.

Establishment of cooperative efforts with employers to facilitate job placement and carry out any other activities that Vocational Rehabilitation and the employers determine to be appropriate.

Identification of staff roles, responsibilities, and available resources, along with specification of the financial responsibility of each component of the statewide workforce development system with regards to paying for certain services (consistent with state law and federal requirements).

The rehabilitation needs of individuals who are served through components of the statewide workforce development system other than through the public vocational rehabilitation program will be updated and reassessed through the methodology outlined in Attachment 4.11(a) of the State Plan. One of the ongoing goals for both the vocational rehabilitation and JobLink system is to continue to refine the processes and procedures for JobLink staff to better determine which consumers with disabilities utilizing the centers should be referred to NC DVRS rather than being served through the JobLink. First it is necessary to determine which consumers served by the JobLink system have a disability. Strategies to improve this will be further explored via mutual collaboration between the Division and JobLink Career Centers to establish training for its staff.

The Division enthusiastically participated in the development of JobLink Career Centers and continues to be an active partner throughout North Carolina to ensure that persons with disabilities are able to access core workforce services. Vocational Rehabilitation staff are represented on the state level as well as on local boards. The Division remains an active partner with the workforce development system and supports the JobLinks concept to provide more universal access to placement and training services; to integrate programs by offering a common core of information and services; and by offering consumers more choices regarding where and how they get services. Through local agreements, direct service delivery staff within the Division have gained more access to comprehensive Division of Employment Security data, which enables faster service delivery and cross-agency collaboration. Nearly all NC DVRS offices have obtained access to these databases to date.

In every community where there are JobLink Career Centers, local Vocational Rehabilitation offices provide counseling staff, vocational evaluators, human resource placement specialists and other staff as appropriate to meet the needs of those individuals who enter a JobLink Career Center and require the specialized services offered by Vocational Rehabilitation. Specific arrangements and staffing patterns by Vocational Rehabilitation staff vary from site to site depending on local needs and agreements. Enhanced working relationships with key partners of the workforce development system such as Social Services, NC Division of Employment Security, NC Community College System, and other local partnerships allow all the agencies to better meet the needs of the individual.

The number of individuals served or identified through components of the workforce development system is increasing. Local Division management represents Vocational Rehabilitation on the local workforce development boards while staff also actively participate in planning, development, and service delivery with both individual component agencies or within the JobLink Career Centers already established.

State Level meetings with identified partners of the workforce development system continue to promote effective collaboration and equal access to services by individuals with disabilities.

Requirement:

Describe how the agency's strategies will be used to:

- (a) achieve goals and priorities identified in Attachment 4.11(c)(1);
- (b) support innovation and expansion activities; and
- (c) overcome identified barriers relating to equitable access to and participation of individuals with disabilities in the state Vocational Rehabilitation Services Program and the state Supported Employment Services Program.

Division's Response:

Establishment of Goals and Priorities and How the Strategies and Substrategies Interrelate and Support their Achievement:

Following a thorough analysis of the results of the 2013 Statewide Comprehensive Needs Assessment, the Division and its SRC, jointly established the prioritized goals below for the period 2015-17:

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 - **Strategy 1.1.** Develop and maintain effective working relationships with businesses in a variety of industries across the state directly and through expanding participation in forums to include US and NC Business Leadership Networks, The Net, local chambers of commerce, and local chapters of Society of Human Resource Managers, and local

workforce development partners. Support information sharing and talent pool exchanges such as the Talent Acquisition Portal.

- **Strategy 1.2.** Equip and train Counselors, Vocational Evaluators and Business Relations Representatives to better identify the workforce needs of businesses and accurately meet them.
- **Strategy 1.3.** Expand and improve job development, placement and employment as recommended in the Comprehensive Statewide Needs Assessment.
- **Strategy 1.4.** Increase consumer participation in on-the-job training services, internships, and apprenticeships.
- **Strategy 1.5.** Coordinate efforts at the state, regional, and local level to improve work-related transportation options for consumers and awareness of existing options.
- **Strategy 1.6.** Increase access to and understanding of caseload and local/regional labor market data and how it can be used to improve outcomes.
- **Strategy 1.7.** Increase knowledge and understanding of VR and its services through systematic outreach to groups such as referral sources, employers, consumers, advocates, school systems, and workforce development partners.

Priority 2. Improve Outcomes for Minorities and Populations Identified as Underserved or Hard to Place in Employment

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Priority 3. Increase Client Satisfaction

Goal 3.1. Increase client satisfaction with their counselor's understanding of their VR needs.

- **Objective 3.1.1.** Increase the percent of clients who are satisfied or very satisfied with their counselor's understanding of their VR needs from 84.7% in FFY 2013 to 90% in FFY 2017.

Goal 3.2. Increase client satisfaction with their counselor in terms of being easy to contact.

- **Objective 3.2.1.** Increase the percent of clients who are satisfied or very satisfied that their counselor was easy to contact from 86.0% in FFY 2013 to 90% in FFY 2017.

Goal 3.3. Increase client satisfaction with their counselor in terms of *working with them as an equal partner*.

- **Objective 3.3.1.** Increase the percent of clients who are satisfied or very satisfied that their counselor worked with them as an equal partner from 85.3% in FFY 2013 to 88% in FFY 2017.

Goal 3.4. Increase client satisfaction with their counselor in terms of *offering options that meet their work-related needs*.

- **Objective 3.4.1.** Increase the percent of clients who are satisfied or very satisfied that their counselor offered options that met their work-related needs from 79.9% in FFY 2013 to 84% in FFY 2017.

Goal 3.5. Increase client satisfaction with their *level of involvement* in their VR program.

- **Objective 3.5.1.** Increase the percent of clients who are satisfied or very satisfied with their level of involvement in their VR program from 81.5% in FFY 2013 to 85% in FFY 2017.

Goal 3.6. Increase client satisfaction with *response time for services* provided by VR staff.

- **Objective 3.6.1.** Increase the percent of clients who rate the response time for services provided by VR staff as *above average* or *excellent* from 63.4% in FFY 2013 to 67% in FFY 2017.

Goal 3.7. Increase client satisfaction with their *overall experience* with the VR program.

- **Objective 3.7.1.** Increase the percent of clients who rate their overall experience with the VR program as *above average* or *excellent* from 66.3% in FFY 2013 to 71% in FFY 2017.
 - **Strategy 3.1.** Identify areas where improved customer friendly practices are needed.
 - **Strategy 3.2.** Improve consumers' understanding of the rehabilitation process with emphasis on the eligibility determination process, comprehensive assessment, and plan development.
 - **Strategy 3.3.** Improve use of methods and techniques to improve the active management of eligibility determination timelines.
 - **Strategy 3.4.** Investigate, develop and expand methods to effectively maintain contact between service staff and consumers while protecting consumers' privacy.
 - **Strategy 3.5.** Optimize policies, rules, processes, and related aides for ease of use for improved delivery of services, including rehabilitation technology services.
 - **Strategy 3.6.** Increase the amount and quality of information available through the Division's online presence.

Attachment 4.11(e)(2) Evaluation and Reports of Progress

Vocational Rehabilitation and Supported Employment Goals

Requirement 1. Clearly identify all VR program goals consistent with the goals described in the FY 2013 Attachment 4.11(c)(1), including an evaluation of the extent to which the VR program goals were achieved.

- Identify the strategies that contributed to the achievement of the goals.
- Provide a description of the factors that impeded the achievement of the goals and priorities.

Division's Response

The following program goals and priorities of the Division were developed in collaboration with the State Rehabilitation Council and informed by the comprehensive statewide needs assessment, public input, and internal organizational needs assessment and planning processes for the purposes of effectively implementing the Division's vocational rehabilitation and supported employment programs. In addition, the priorities and goals established support, improved performance on standards and indicators, and improved compliance in casework issues identified in the Corrective Action Plan that has since been completed during federal fiscal year (FFY) 2010.

Priority 1: Goal 1: Improve Employment Outcomes

Increase quantity and quality of employment outcomes of individuals with disabilities, particularly individuals with significant and most significant disabilities through a dual customer approach.

Objective 1.1: Develop and maintain quality relationships with businesses in a variety of industries across the state.

Objective 1.2: Provide consumers with the services necessary to increase their employment options.

Measures for Goal 1: NC DVRS will achieve or exceed the required federal standards for the following performance indicators:

RSA Performance Standards as Measures for Goal 1	Federal Fiscal Year			
	2010	2011	2012	2013
1.1. The number of persons achieving employment outcomes will equal or exceed the previous year.	5,961	6,303	6,758	6,723
1.2. The percentage of all individuals who have achieved an employment outcome after exiting the program having received services will equal or exceed 55.8%.	56.6%	56.5%	56.4%	50.4%
1.4. Of all individuals who exit the VR program in competitive, self-, or Business Enterprise Program employment with earnings equivalent to at least the minimum wage, the percent who are individuals with significant disabilities will equal or exceed 62.4.	77.2%	77.1%	79.2%	79.7%
1.5. The average hourly earnings of all individuals who exit the program in competitive employment as a ratio to the average hourly earnings for all employed North Carolinians will equal or exceed 0.52.	0.50	0.48	0.48	0.47
1.6. Of the individuals who achieve competitive employment, the difference between the percent who reported their own income as the largest single source of economic support at closure compared to the percent at application. The difference must equal or exceed 53.	62.3	63.8	63.8	62.8

Performance Assessment 1.1. *The number of persons achieving employment outcomes will equal or exceed the previous year.*

During FFY 2013, the number of individuals exiting the Division's VR program in employment decreased by 35 (<1%) from the previous year, although there was net gain of 762 since FFY 2010, the baseline year. The sustainability of markedly increased employment outcomes from that of the baseline year is largely due to successful partnerships with community rehabilitation programs, and an emphasis on vocational counseling and guidance, benefits counseling, rehabilitation services, and an emphasis on matching employers' workforce needs with the skillsets of VR consumers through a Dual Customer Approach. Placements through community rehabilitation programs accounted for 1,987 (30%) of the total 6,723 placements that resulted in employment outcomes for VR consumers in FFY 2013. Other strategies employed to improve performance on this indicator are summarized in attachment 4.11(d). The Division continues to utilize on-the-job training and internship services, though wage subsidies are funded at a reduced amount relative to when additional funding for these services was available through the American Recovery and Reinvestment Act.

Performance Assessment 1.2. *The percentage of all individuals who have achieved an employment outcome after exiting the program having received services will equal or exceed 55.8%.*

The Division's VR Program did not meet this indicator in FFY 2013. This is partially due to a higher than expected number of counselor vacancies. With many of the vacant positions now being filled, continued monitoring of this indicator and increased emphasis of its importance by management, in addition to group orientation at the larger offices, which should better inform VR clients on the program's expectations of employment prior to provision of planned services, the Division expects to improve its performance on this measure for FFY 2014.

Performance Assessment 1.4. *Of all individuals who exit the VR program in competitive, self-, or Business Enterprise Program employment with earnings equivalent to at least the minimum wage, the percent who are individuals with significant disabilities will equal or exceed 62.4.*

The Division continues to substantially exceed the RSA standard in this category through its emphasis on serving individuals with significant and most significant disabilities in collaboration with community rehabilitation programs, advocacy groups, and multiple referral sources.

Performance Assessment 1.5. *The average hourly earnings of all individuals who exit the program in competitive employment as a ratio to the average hourly earnings for all employed North Carolinians will equal or exceed 0.52.*

For federal fiscal year 2013, the Division was not able to meet this RSA indicator, which continues to present a challenge to the Division, despite strategies to encourage additional education and training to increase client earnings. The Division attributes its current performance on this indicator primarily as a result of two main factors: the large number of transition-age youth whose exit the VR program in entry-level positions and the number of individuals served through supported employment, which comprise 15% of the programs employment outcomes. These individuals exit the VR program with earnings that are closer to minimum wage. Despite the impact on the Division's performance on this measure, the Division maintains a strong commitment to supported employment and providing VR services for transition-age youth. This past year, the Division participated in a learning collaborative sponsored by the Institute for Community Inclusion at the University of Massachusetts, Boston, to study strategies for increasing consumer wages, including a team-based approach with a focus on employer relations and job matching. The pilot study included the Asheville and Forest City offices, which represent different types of local economies. During the period of the study, average hourly earnings for clients at the pilot offices had increased while wages had decreased for clients served at other offices throughout the state.

Performance Assessment 1.6. *Of the individuals who achieve competitive employment, the difference between the percent who reported their own income as the largest single source of economic support at closure compared to the percent at application. The difference must equal or exceed 53.*

During FFY 2013, the Division exceeded the performance standard for this indicator, and expects continued performance in FFY 2014.

Measures for Goal 1 Objective 1.1: NC DVRS will equal or improve performance when compared to the baseline for the following measurable indicators:

Measures for Objective 1.1. Business Relationships, Services, and Activities	Federal Fiscal Year		Net Change
	2012	2013	FY 2013 - 2012
Measure 1.1.a. Number of business relationships developed.	1,089	2,743	1,654
Measure 1.1.b. Number of services provided to employers and business relationship development activities:			
Windmills Sensitivity Training	79	142	63
Information about VR Services	839	1,358	519
HR Assistance	327	315	-12
Provided Incentives (Federal Bonding, OJT/Internships, WOTC)	358	303	-55
Served on a partnership committee (government or community)	82	76	-6
Coordinated a Business Disability Employment Awareness Month Event	120	78	-42
Represented VR at a community or business function	722	234	-488
Business Relations Follow-up	1,214	2,480	1,266
Total Services and Activities	3,741	4,986	1,245
Measure 1.1.c. Percent of individuals exiting the VR program in competitive employment in each standard occupational classification (SOC) group.			
Food Preparation and Serving Related	16.74%	18.37%	1.63%
Production	12.80%	13.08%	0.28%
Building/Grounds Cleaning and Maintenance	11.66%	12.81%	1.15%
Office and Administrative Support	11.48%	11.26%	-0.22%
Transportation and Material Moving	10.89%	10.35%	-0.54%
Sales and Related	8.48%	8.42%	-0.06%
Healthcare Support	5.27%	5.13%	-0.14%
Personal Care and Service	5.87%	5.13%	-0.74%
Construction and Extraction	3.65%	3.35%	-0.30%
Installation, Maintenance, and Repair	3.15%	2.52%	-0.63%
Management	1.60%	1.88%	0.28%
Education, Training, and Library	1.90%	1.67%	-0.23%
Healthcare Practitioners and Technical	1.43%	1.55%	0.12%
Community and Social Services	1.35%	1.22%	-0.13%
Business and Financial Operations	0.46%	0.61%	0.15%
Arts, Design, Entertainment, Sports, and Media	0.86%	0.61%	-0.25%
Protective Services	0.52%	0.54%	0.02%
Computer and Mathematical	0.71%	0.48%	-0.23%
Farming, Fishing, and Forestry	0.56%	0.48%	-0.08%
Architecture and Engineering	0.28%	0.30%	0.02%
Life, Physical, and Social Science	0.18%	0.15%	-0.03%
Legal	0.09%	0.09%	0.00%
Military Specific	0.06%	0.01%	-0.05%

Performance Assessment for Measure 1.1.a. Number of business relationships developed:

Reported results for the baseline year FFY 2012 may be lower than expected due to vacancies, but, according to reported data, total business relationships increased by more than 150% from 2012 to 2013.

An increase in business relationships is expected to result in an increase in direct placements for FFY 2014.

Performance Assessment for Measure 1.1.b. *Number of services provided to employers and business relationship development activities:*

The Division's activities in this area may be subject to self-reporting error until a system for electronically tracking these via a centralized database is implemented. Business relationships development services and associated relationship-building activities better enable the direct placement of VR consumers with employers. A video for employers, titled "Part of Our Team," features testimonials from satisfied employers was developed in FFY 2012 and has helped during outreach events such as Disability Employment Awareness Month (DEAM). According to the reported data, there was a 33% increase in total services and activities from FFY 2012 to 2013. This gain is attributed to the increase in business relations follow-up activities, which more than doubled; the provision of information to employers and other stakeholders about VR services, which increased by nearly 62%; and the provision of Windmills sensitivity training, for which there was an 80% increase from the previous year. There was, however, a 68% decrease in occurrences where the VR program was represented at a community or business function, which is mainly attributed to staff vacancies, travel restrictions, and limited resources for participation in such events.

Performance Assessment of Measure 1.1.c. *Percent of individuals exiting the VR program in competitive employment in each standard occupational classification (SOC) group:*

The distribution of occupational groups presented in the table above indicates that individuals exiting the VR program in competitive employment work in a variety of jobs across industries, representing every major standard occupational group. About two-thirds of VR consumers find work in food preparation and serving-related occupations, production, building and grounds cleaning and maintenance, and office and administrative support, and transportation and material moving. Another 19% are distributed across sales and sales-related occupations, healthcare support, and personal care and service occupations. The remaining 15% are distributed across all other occupations. There was only a modest change from federal fiscal year 2012 to 2013 in the percent of VR clients working in each occupational group, with the largest increase being 1.63% for VR clients working in food preparation and serving related jobs and 1.15% for VR clients working in building and grounds cleaning and maintenance occupations. The largest decreases were -0.63% for installation, maintenance, and repair workers; -0.74% for personal care and service related occupations; and -0.54% for transportation and material moving related occupations.

Measures for Goal 1: Objective 1.2: NC DVRS will equal or improve performance when compared to the baseline for the following indicators regarding the provision to consumers of the services necessary to increase their employment options.

Measures for Objective 1.2. Provide consumers with the services necessary to increase their employment options.	Federal Fiscal Year				Net Change FY 2013 - 2010
	2010	2011	2012	2013	
Measure 1.2.a. Consumers responding "a lot" to the Consumer Satisfaction Survey question: "Did VR help you search for a job?"	41.5%	41.1%	42.8%	41.9%	0.4%
Measure 1.2.b. Consumers responding "a lot" to Consumer Satisfaction Survey question: "Did VR help you decide on job choices?"	32.8%	32.8%	34.9%	34.2%	1.4%

Performance Assessment for Measure 1.2.a. *Consumers responding "a lot" to the Consumer Satisfaction Survey question: "Did VR help you search for a job?"*

Performance on this measure has remained relatively steady since the FFY 2010 baseline year, with a net increase of about 0.4% from the baseline year in FFY 2013. Performance is slightly lower than that of

the previously year, but the 0.9% difference is not remarkable. The VR Program will continue its efforts in helping consumers with job search assistance.

Performance Assessment for Measure 1.2.b. *Consumers responding “a lot” to Consumer Satisfaction Survey question: “Did VR help you decide on job choices?”*

Performance on this measure has also remained relatively steady since FFY 2010, with slight improvement from the baseline year in FFY 2012 and 2013. For FFY 2013 performance slightly lower than that of the previous year, but the 0.7% difference is not remarkable. Compared to the baseline year, there is a modest 1.4% net improvement. The Division expects similar results will be achieved for FFY 2014.

Priority 2: Goal 2: Access to Services

Increase consumers’ understanding of and access to the Division’s services and programs including their ability to provide feedback.

- Objective 2.1: Increase the availability of information about the VR program within the community.
- Objective 2.2: Increase access to feedback tools for potential, current and former consumers of services.
- Objective 2.3: Increase access to program services for potential consumers.

Measures for Objectives 2.1 and 2.2: NC DVRS will equal or improve performance when compared to the baseline for the following indicators of (a) increased availability of information about the VR program within the community; and (b) increased access to communication with the Division regarding its services.

Measures for Goal 2: Objectives 2.1 and 2.2: Increase availability of information about the VR program within the community and increase access to communication with the Division regarding its services.		Federal Fiscal Year				Net Change FY 2013 - baseline FY
		2010	2011	2012	2013	
Measure 2.a.	Ratio of individuals who develop a new Individualized Plan for Employment (IPE) to applicants for services.	55.3%	56.1%	56.0%	56.1%	0.8%
Measure 2.b.	Consumer satisfaction survey participation rates (adjusted for undeliverable addresses)	15.0%	13.0%	17.8%	18.6%	3.6%
Measure 2.c.1.	Number of public listening and discussion sessions held for stakeholder comment (baseline = FFY 2011)	*	7	7	7	0
Measure 2.c.2.	Total attendance at public listening and discussion sessions held for stakeholder comment (baseline = FFY 2011)	*	93	173	116	23
Measure 2.d.	Number of individuals emailing comments to the VR State Office regarding the State Plan and VR services (baseline = FFY 2011)	*	20	26	TBD	TBD
Measure 2.e.1.	Number of individuals served by the Client Assistance Program (CAP) regarding the North Carolina VR program	135	131	138	123	-12
Measure 2.e.2.	Total number of contacts with individuals served by the Client Assistance Program (CAP) regarding the NC VR program	1,410	1,611	1,778	1,546	136

Performance Assessment of Measure 2.a. *Ratio of individuals who develop a new Individualized Plan for Employment (IPE) to applicants for services.*

For this indicator, a higher ratio indicates that the Division receives referrals for individuals who are eligible for services and processes casework for these individuals, from application to an individualized plan for employment, in a timely manner. Performance on this indicator has remained steady the past three years, with a modest net increase of 0.8% for federal year 2013 from that of the baseline year.

Performance Assessment for Measure 2.b. *Consumer satisfaction survey participation rates.*

The Division and the State Rehabilitation Council have been working together for several years toward increasing the response rate by making the survey methods more accessible and easy to use. The Division has made specific efforts to reach consumers by conducting the satisfaction survey by mail, e-mail and telephone. The rate of participation is 1.2% higher for FFY 2013 than the previous year, and 3.6% higher than the baseline year. Participation in the VR satisfaction survey is expected to further increase in FFY 2014.

Performance Assessment for 2.c. *Public Input forums held & total attendance.*

The Division and the State Rehabilitation Council continue to use multiple channels of communication to invite stakeholders to the public listening and discussion sessions that are held every year. A minimum of two sessions are held in each of the Divisions three service regions each year, and the specific locations are varied from year to year to better enable stakeholders from different communities the opportunity to participate. Invitations are made through a public notice press release, website notifications, notifications to stakeholder groups, and mail-outs to consumers who reside in the local service area where the input session is held. The Division expects to incorporate the use of social media and innovative technology for these events.

Performance Assessment for Measure 2.d. *Number of individuals emailing comments to the VR State Office regarding the State Plan and VR services.*

The Division offers several methods of accessing Division staff and leadership, including the SRC chair by email and through web-mail links. Several individuals utilize this option to submit their comments. The Division expects a steady increase in the number of individuals using this method of access in the upcoming years and has plans to expand access through social media and other innovative communications technology. Note that this measure does not include inquiries received at the local offices largely for purposes of contacting counselors and managers, which greatly exceed those directed centrally.

Performance Assessment for Measure 2.e. *Number of cases and contacts with individuals served by the Client Assistance Program (CAP) regarding the North Carolina VR program.*

From the baseline year, there was a net decrease of 12 individuals served by the client assistance program (CAP). The increase in total contacts is attributed in part to the availability of information regarding CAP. Consumer awareness of CAP and their right to appeal agency decisions, as measured on the consumer satisfaction survey, has remained relatively steady over the past four years. Consumers are made aware of CAP at multiple points in the rehabilitation process and information regarding CAP is available online and through brochures that are provided at public listening and discussion sessions. A consumer representative from CAP is present at most of these sessions. The decrease in the number of cases served by CAP may suggest that managers, counselors, and other direct service staff are working more closely with consumers to resolve differences at the office-level. Additionally, individuals who disagree with agency decisions are often able to achieve a resolution with regional and local office staff members at the public listening and discussion sessions.

Additional Measures for Goal 2 Objective 2.1:

Measurement definitions for the following indicators were to be established in FFY 2012, but were not developed, excepting business relationships with employers, which are reported under Goal 1 above.

- **2.1.a. Public Website traffic.** Enhancements to the NC DHHS public website were made through FFY 2012 and 2013, are currently still in progress as the Department continues to improve its online presence and communication with the citizens of North Carolina.
- **2.1.b. Number of presentations to various stakeholder groups.** A measurement definition and system for collecting these data was not developed, except for public listening and discussion sessions, reported under this objective, and business relationships with employers, which are reported under Goal 1 above.

Measures for Goal 2 Objective 2.3: NC DVRS will maintain or improve performance as compared to the baseline for the following indicators:

Measures for Goal 2: Objective 2.3: Increase access to program services for potential consumers.		Federal Fiscal Year				Net Change FY 2013 - baseline FY
		2010	2011	2012	2013	
Measure 2.3.a.	Percent of individuals exiting VR program who had one (1) or more closures in previous 36 months.	19.05%	19.01%	19.04%	19.55%	0.5%
Measure 2.3.b.	Percent of VR applicants per referral source category.					
	Self-referral	36.48%	37.83%	42.65%	45.45%	8.97%
	Educational Institutions (elementary/secondary)	16.45%	15.25%	15.13%	15.48%	-0.97%
	Medical Health Provider (Public or Private)	11.36%	11.61%	11.41%	10.77%	-0.59%
	Family/Friends	8.49%	8.89%	7.64%	6.92%	-1.57%
	State or Federal Justice Agencies	6.92%	6.23%	5.14%	4.49%	-2.43%
	Other Sources	6.07%	5.74%	4.65%	3.78%	-2.29%
	Mental Health Provider (Public or Private)	4.11%	3.95%	3.91%	3.62%	-0.49%
	Other State Agencies	3.04%	3.00%	3.05%	3.03%	-0.01%
	Rehabilitation facilities	0.99%	1.07%	1.10%	1.52%	0.53%
	One-stop Employment/Training Centers	1.79%	1.76%	1.29%	1.35%	-0.44%
	Educational Institutions (post-secondary)	1.13%	0.99%	0.97%	1.04%	-0.09%
	Social Security Administration	1.37%	1.63%	1.20%	0.99%	-0.38%
	Welfare Agency (State or local government)	0.65%	0.73%	0.70%	0.61%	-0.04%
	State Employment Service Agency	0.52%	0.66%	0.64%	0.48%	-0.04%
	Other VR State Agencies	0.44%	0.50%	0.33%	0.29%	-0.15%
	Employers	0.14%	0.14%	0.15%	0.15%	0.01%
	Workers Compensation	0.04%	0.02%	0.04%	0.04%	0.00%

Performance Assessment for Measure 2.3.a. *Percent of individuals exiting VR program who had one (1) or more closures in previous 36 months.*

The proportion of consumers exiting the VR program with one or more prior case closures in the preceding 36 months is virtually unchanged from year-to-year, with a net 0.5% increase for FFY 2013. These data include case closures of any status. For the period under evaluation, there was a net increase of 1% for individuals exiting from applicant status prior to eligibility determination (average = 13.7%); a 1.1% net increase in for individuals exiting VR in employment (average = 21.8%); a 0.9% net decrease for individuals exiting without employment after services provided under an individualized plan for employment (average = 21.0%); and a 0.4% net decrease for individuals exiting the VR program after eligibility determination but prior to receiving of planned services (average = 19.1%). The trend for this indicator suggests that about one in five individuals determined eligible for VR services will return to the VR program within 36 months of case closure, regardless of whether they exited the program in employment. This includes clients who exited VR without an employment outcome who may later decide

to try again, and individuals who achieved their employment goals but require additional VR services for job retention or who after at least 90 days of continual employment lost their job and require VR services to find another one.

Performance Assessment for Measure 2.3.b. Percent of VR applicants per referral source category.

The data for this measure show an increase in the proportion of applicants that are self-referrals. From federal fiscal year 2010 to 2013, there was nearly a 9% net increase in self-referrals and just over a 0.5% net increase in referrals from rehabilitation facilities, while the proportion of referrals from all other categories was relatively unchanged (i.e., referrals from employers and worker's compensation) or declined. The referral categories with the largest net percent decrease were elementary and secondary educational institutions (-1%); family and friends (-1.6%); justice agencies (-2.4%); and other sources not listed (-2.3%). During the period of this evaluation, there was a steady decline in the total number of applications for VR services, with a net decrease of 2,488 applicants: from 25,202 in federal fiscal year 2010 to 22,714 in 2013. However, the decline in total applicants has resulted in a steadily decreasing percentage of cases closed from application status prior to eligibility determination (status 08). In FFY 2010, there were 4,934 such cases, which accounted for 21.8% of the 22,599 total case closures that year, whereas there were 4,416 such cases, which accounted for 17.2% of the 25,704 total case closures for FFY 2013, for a net decrease of 4.7%. The trend suggests that although the number and proportion of referrals other than self-referrals has declined for most referral source categories, the quality of referrals, in terms of an individual being eligible for VR services, has improved.

Priority 3: Goal 3: Service Quality and Uniformity:

NC DVRS shall improve the quality and uniformity of the services it provides.

- Objective 3.1: Maintain a customer focus in the planning and provision of services.
- Objective 3.2: Ensure statewide uniformity of case management and policy implementation.

Measures for Goal 3: NC DVRS will equal or improve performance when compared to the baseline for the following measurable indicators:

Measures for Goal 3: Objective 3.1. Maintain a customer focus in the planning and provision of services.	Federal Fiscal Year				Net Change FY 2013 - baseline FY
	2010	2011	2012	2013	
Measure 3.1.a. Percent of consumers responding "above average" or "excellent" on the Consumer Satisfaction Survey: "Overall, how would you rate your experience with the NC Vocational Rehabilitation Services (VR) program?"	67.7%	68.3%	68.1%	66.3%	-1.4%
Measure 3.1.b. Percent of consumers responding "above average" or "excellent" on the Consumer Satisfaction Survey: "How would you rate the response time of services provided by VR staff?"	64.0%	65.2%	65.7%	63.4%	-0.6%
Measure 3.1.c. Percent of consumers responding "Yes" to the Consumer Satisfaction Survey: "Did your counselor inform you that if you had a concern about services that you could contact the Client Assistance Program (CAP)?"	49.7%	53.1%	56.9%	59.2%	9.5%
Measure 3.1.d. Percentage of consumers responding "Yes" on the Consumer Satisfaction Survey: "Did your counselor inform you about your right to appeal agency decisions with which you disagree?"	57.5%	59.9%	62.1%	63.5%	6.0%

Measures for Goal 3: Objective 3.1. Maintain a customer focus in the planning and provision of services.	Federal Fiscal Year				Net Change FY 2013 - baseline FY
	2010	2011	2012	2013	
Measure 3.1.e. Percent of consumers indicating that they were "satisfied" or "very satisfied" on Consumer Satisfaction Survey: "How satisfied were you with your level of involvement in your rehabilitation program"	80.6%	81.1%	81.7%	79.7%	-0.8%
Measure 3.1.f. Median number of days from referral date to actual application date by FFY of the actual application date.	10	11	11	11	1
Measure 3.1.g. Median number of days from actual application date to eligibility determination by federal year of the status 10 effective date or case activation date.	35	34	33	34	-1
Measure 3.1.h. Median number of days from eligibility determination to IPE by FFY of activation date.	28	32	31	32	4
Measure 3.1.i. Median number of days from case activation to the provision of a major service (non-assessment) by the federal year of the case activation date.	28	28	29	29	1

Performance Assessment for Measure 3.1.a: *Percent of consumers responding "above average" or "excellent" on Consumer Satisfaction Survey: "Overall, how would you rate your experience with the NC Vocational Rehabilitation Services (VR) program?"*

The percent of former VR consumers rating their overall experience as "above average" or "excellent" has remained fairly steady since federal fiscal year 2010 at an average of 67.6%, though there as a net 1.4% decrease when comparing federal fiscal year 2013 to the baseline year. Although the decrease is relatively modest, it speaks to the need to continuously emphasize the importance of consumer satisfaction and work towards improving services for VR consumers.

Performance Assessment for Measure 3.1.b: *Percent of consumers responding "excellent" or "above average" on Consumer Satisfaction Survey: "How would you rate the response time of services provided by VR staff?"*

For the three years since the baseline of federal fiscal year 2010, the division increased consumer satisfaction with the response time of services provided by VR staff members. This declined in FFY 2013, possibly due to a greater than average number of staff vacancies. However, the net decrease since the baseline year is 0.6%, which is relatively small considering the average satisfaction rate for the evaluation period was 64.6%.

Performance Assessment for Objective 3.1.c: *Percent of consumers responding "Yes" to Consumer Satisfaction Survey Q4: "Did your counselor inform you that if you had a concern about services that you could contact the Client Assistance Program (CAP)?"*

The Division's increased performance on this measure, with a 9.5% net increase from the baseline year, indicates that efforts to inform and remind consumers about the Client Assistance Program through including this information at multiple points in the rehabilitation plan and through counselor-consumer discussion has made this notable increase in the number of individuals aware of the Client Assistance Program.

Performance Assessment for Objective 3.1.d: *Percent of consumers responding "Yes" on Consumer Satisfaction Survey Q5: "Did your counselor inform you about your right to appeal agency decisions with which you disagree?"*

The Division's increased performance, with a 6% net increase on this measure, indicates that efforts to inform and remind consumers about their right to appeal agency decisions with which they disagree have been effective. These efforts include the provision of information at multiple points in the rehabilitation plan and through counselor-consumer discussion, which has made this notable increase in the number of individuals aware of their rights.

Performance Assessment for Objective 3.1.e: *Percent of consumers indicating that they were "satisfied" or "very satisfied" on Consumer Satisfaction Survey Q7: "How satisfied were you with your level of involvement in your rehabilitation program (for example deciding on job goals, selecting available services, choosing providers, etc.)?"*

The Division's performance in this area is steady at an average of satisfaction rate of 80.8%, and high performance in this area is attributable in large part to a Division culture that emphasizes partnership between the VR counselor and the consumer to the greatest extent possible. There was, however, a 2% decrease in satisfaction for FFY 2013 from the previous year, and a net decrease of 0.8% from the baseline year, which may be attributable in some part to staff vacancies. Although the decrease is relatively small, it supports a need for continued emphasis on the counselor-client relationship and consumer involvement.

Performance Assessment for Objective 3.1.f: *Median number of days from referral date to actual application date by FFY of actual application date.*

The median number of days from the clients' referral date to their actual application date has remained perfectly constant since federal year 2011, with a net increase of one (1) day required for this stage in the rehabilitation process since 2010. The Division considers this amount of time to be acceptable.

Performance Assessment for Objective 3.1.g: *Median number of days from actual application date to eligibility determination by federal year of the status 10 effective date or case activation date.*

The median number of days from the clients' actual application date to eligibility determination has remained relatively constant since the baseline year, with an average of 34 days. There was a net decrease of one (1) day required for this stage in the rehabilitation process since 2010. The Division considers this amount of time to be acceptable, though emphasizes the importance of determining eligibility for VR consumers within 60 days, excepting extenuating circumstances. The Division will continue to work toward minimizing any delay. The Division expects increased use of electronic systems for the transfer of the diagnostic and supporting documentation required for eligibility determinations will further improve its efficiency in this area.

Performance Assessment for Objective 3.1.h: *Median number of days from eligibility determination date to an individualized plan for employment by federal year of the case activation date.*

The amount of time to develop an individualized plan for employment (IPE) following eligibility determination is a median 31 days or full month; and there has been a net increase of 4 days since the baseline year, 2010. These data have been interpreted to suggest that informed choice and partnering closely with consumers and their advocates often involves scheduling, which can sometimes cause delays, but, on whole, the Division's VR counselors are able to develop an IPE in collaboration with consumers in a relatively timely manner.

Performance Assessment for Objective 3.1.i: *Median number of days from case activation to the provision of a major service (non-assessment) by the federal year of the case activation date.*

The wait-time from case activation to the provision of a major service provided under an individualized plan for employment (IPE) is a median 29 days, or just under one month, and there has been only a net increase of one (1) day since the baseline year, 2010. Although acceptable wait-time would vary by service, overall, the Division has maintained consistency in this area. The Division expects the implementation of its electronic case management system (BEAM) to create efficiencies that decrease wait-time for services, which should be observable in federal year 2015 and thereafter.

Measures for Goal 3: Objective 3.2.a: Ensure statewide uniformity of case management and policy implementation: Casework quality review irregularity rates		Federal Fiscal Year				Net Change FY 2013 - baseline FY
		2010	2011	2012	2013	
1	QDS Index Score (based on scores from below items)	4.57%	5.05%	4.14%	4.04%	-0.53%
2	Medical-Specialist Data supports existence of impairments?	1.87%	1.71%	1.98%	1.21%	-0.66%
3	Data supports impediments to employment?	1.80%	1.72%	1.52%	1.22%	-0.58%
4	Data supports: Requires VR services?	1.08%	1.15%	1.36%	1.04%	-0.04%
5	SSI/SSDI benefits verified for presumptive eligibility?	3.06%	1.91%	4.37%	1.76%	-1.30%
6	Data Supports SD Decision Appropriate?	6.51%	6.93%	5.75%	4.47%	-2.04%
7	Analysis of comprehensive assessment sufficiently documented?	9.75%	11.27%	8.71%	10.67%	0.92%
8	Financial need is appropriately established?	9.89%	10.24%	10.75%	9.18%	-0.71%
9	Comparable benefits used appropriately?	2.13%	2.99%	2.23%	3.74%	1.61%
10	Service needs reflected from the comprehensive assessment?	7.60%	4.59%	3.84%	3.23%	-4.37%
11	All major services initiated within time frames noted?	3.89%	9.16%	5.34%	5.80%	1.91%
12	Planned services have been provided toward achieving job choice	5.17%	6.22%	3.98%	5.35%	0.18%
13	Services planned in an integrated setting?	1.05%	0.56%	0.24%	0.26%	-0.79%
14	Documentation of substantial services and prof interventions?	2.96%	5.45%	5.56%	3.29%	0.33%

Performance Assessment for Measures 3.2a: Ensure statewide uniformity of case management and policy implementation: Casework quality review irregularity rates

A team of centrally managed Quality Development Specialists that are assigned to offices throughout the state review samples of cases from all caseloads throughout the year. These specialists are instrumental in training new counselors in the interpretation of case service policy, casework documentation and standards, compliance requirements and overall case service quality.

There were a few areas with a net increase in casework irregularities from federal year 2010 to 2013, notably a net 1.6% increase documentation regarding whether comparable benefits were used appropriately, and a net 1.9% increase regarding whether all major services were initiated within time frames in the consumers' individualized plan for employment. The two casework areas where counselors need the most coaching include (7) documentation of an analysis of the comprehensive assessment and (8) establishment of financial need. Other casework areas where the rate of irregularities is more than 5% in FFY 2013 include: (11) whether major services were initiated in the timeframes noted on the plan; (12) whether planned services were provided toward achieving job choice. In noting these areas, the Division expects that new counselors entering into their profession will require coaching and, in addition to reducing overall irregularities, the casework review process is meant to be instructional

It is also important to note that the overall trend is a net 0.53% decrease in observed casework irregularities across the 13 casework assessment areas, from 4.57% in FFY 2010 to 4.04% in 2013, as measured on an index score. There were also significant improvements made in specific casework areas, including a net 4.37% decrease in irregularities associated with whether service needs were reflected from a comprehensive assessment; a 2.04% net decrease in irregularities associated with whether data in the case file appropriately supports the significance of disability (SD) determination decision; and a 1.3% net decrease in irregularities associated with whether SSI/SSDI benefits were verified for presumptive eligibility.

Measures for Goal 3: Objective 3.2.b: Total and average direct cost case service expenditures by region*	Federal Fiscal Year of Payment				Net Change FY 2013 - baseline FY
	2010	2011	2012	2013	
Measure 3.2.b.1. Total direct service expenditures by region					
Western Region	\$18,681,910	\$18,810,147	\$17,831,289	\$14,988,963	-\$3,692,947
Central Region	\$18,334,856	\$17,755,601	\$19,460,966	\$18,381,245	\$46,389
Eastern Region	\$12,788,088	\$12,359,273	\$12,809,717	\$12,489,599	-\$298,490
Measure 3.2.b.1. Average per case service expenditures by region					
Western Region	\$1,887	\$1,953	\$1,845	\$1,784	-\$103
Central Region	\$1,384	\$1,341	\$1,410	\$1,400	\$16
Eastern Region	\$1,715	\$1,602	\$1,628	\$1,649	-\$66

*Case service expenditures include caseload funds and other case services budgets, but do not include performance-based payments to Community Rehabilitation Programs or other contracts set annually.

Performance Assessment for Measures on Objective 3.2.b: Total and average direct cost case service expenditures by region

From federal year 2010 to 2013, there was a net decrease in total and average per case expenditures for the Division's Western and Eastern regions. For the Western Region, the decrease is mainly due to a decrease in physical restoration services, for which the net decrease was \$3.1 million. In the Eastern Region, the net decrease was in part due to a decrease in the sponsorship of restoration services, and also by a reduction in expenditures for job supports and placement services, which is in part associated with the implementation of a milestone payment system for job development services. The reduction in restoration services and change from hourly-rate to milestone payments for job development services reduced average per case costs in both the Western and Eastern Regions; however, per case and total expenditures increased in the Central Region, mainly due to increase in VR sponsorship of training and training-related support services. Although, to some extent, the differences in expenditures by region are attributed to availability of community rehabilitation programs, contracted services, other resources and varying individuals needs of consumers, the Division will continue to monitor expenditures to ensure that services are provided consistently and uniformly across regions, as appropriate to the individual needs of consumers.

Priority 4: Goal 4: Resources

Sustain efforts necessary to retain, train and recruit qualified staff and provide or develop resources necessary to carry out the Division's goals, priorities, and services for individuals with disabilities and our business customers statewide.

- Objective 4.1: Continue to recruit qualified staff with skills critical to the delivery of all service components of the Division.
- Objective 4.2: Provide ongoing training to staff in order to maintain a high level of service effectiveness.
- Objective 4.3: Increase the retention of highly skilled staff throughout the Division.
- Objective 4.4: Identify and develop resources that are critical to the delivery of all service components of the Division.

Measures for Goal 4:	Federal Fiscal Year			Net Change
	2011	2012	2013	FY 2013 - baseline FY
Measure 4.1.a. Staff Turnover Rate and Vacancies for all VR staff members				
1 Turnover rate	9.54%	8.14%	8.17%	-1.37%
2 Total separations	150	125	119	-31
3 Retirements	45	27	45	0
4 Retirement rate	2.86%	1.76%	3.09%	0.23%
5 Number of Employees	1,573	1,536	1,457	-116
Measure 4.1.b. Staff Turnover Rate and Vacancies for VR Counselor I and VR Counselor II positions				
1 Turnover rate	9.94%	10.00%	13.91%	3.96%
2 Total separations	34	36	47	13
3 Retirements	6	5	12	6
4 Retirement rate	1.75%	1.39%	3.55%	1.80%
5 Number of Employees	342	360	338	-4

Performance Assessment for Measure 4.1: Staff vacancies and turnover rate.

When considering all DVRS staff members, there was a net decrease of 1.37% in the turnover rate, from 9.54% in federal fiscal year 2011 to 8.17% in 2013. There were also fewer total separations, and total DVRS staff size decreased by 116 positions: from 1,573 in FFY 2011 to 1,457 in FFY 2013. Retirement is a leading cause of separation, accounting for 38% of all separations in FFY 2013.

For VR Counselor I and VR Counselor II positions, the turnover rate increased 3.96%, from 9.94% in FFY 2011 to 13.91% in 2013, and there was a net increase of 13 total separations. Retirement is a leading cause of separation for VR counselors, accounting for 26% of rehabilitation counselor separations in FFY 2013.

The Human Resources section continues to closely monitor staff turnover, and will work towards strategies for staff retention. A specific strategy developed from information obtained through exit interviews is to emphasize new employee orientation and peer-provided guidance, such as made available through casework advisor positions. The recruitment of qualified staff will also be necessary as older staff members retire.

Measure: Baseline: FFY 2012: 15.40 training hours based on 960 employees. In FFY 2013, Division staff received 2,431 hours of training on the BEAM case management system, in addition to other staff development activities.

Measures for Goal 4 Objective 4.2: Average Division-funded, coordinated, or administered training hours offered per staff annually.

	FFY 2012 (Baseline)*	FFY 2013
Total number of employees provided training	960	941
Average number of training hours per employee	15.4	15.0

Measures for Goal 4 Objective 4.2: Number of staff attending a training session in the last FFY broken down by position type.*

Position Class	FFY 2012 (Baseline)	FFY 2013
Managers/Supervisors Receiving Training	497	173
Professional/Knowledge Workers Receiving Training	1,700	1,194
Team Members Receiving Training	781	768

*These data include counts of staff members who separated from service with the Division during the fiscal year.

Performance assessment: During this baseline year of FFY 2012, the staff development section has utilized their resources efficiently through the scheduling of training sessions for office staff meetings, web-based training provided directly or contracted through the Division. Furthermore, additional excellent resources have been made available by resources such as training by TACE centers and other national agencies focusing on employment and disability issues. Not as many training sessions were provided in FFY 2013, in large part due to budget and travel restrictions.

Measures for Goal 4 Objective 4.4: Total value of and number of different sources of third party funding or grants, beyond the basic support grants, applied toward the provision of vocational rehabilitation and related services.

Fiscal Year*	Number of Third Party Sources	Total Amount
2011-12 (baseline)	100	\$2,353,651
2012-13	105	\$2,610,598
2013-14	104	\$2,597,120

* Third-party funding from school systems is provided on a state fiscal cycle, and coincides with a complete traditional academic calendar year. Data for FY 2013-14 are available for reporting because the date parameters for this measure are on the state fiscal cycle.

Performance Assessment: Local school systems account for the majority of third-party funding, although a small portion is provided by county commissions. This measure indicates the investment in vocational rehabilitation services by North Carolina's school systems that support having a vocational rehabilitation counselor available onsite at the schools to provide transitional services for students with disabilities. From FY 2012 to 2013, the Division entered into third-party agreements with five (5) additional school systems for an additional \$256,947 in funding towards the sponsorship of VR services. For state fiscal year 2014, there is a loss of one (1) third-party agreement and \$13,478 in funding; however, since the baseline year, there is a net gain of four (4) third-party agreements and \$243,469 in third-party funding to provide VR services for transition age youth.

Priority 5: Goal 5: Service Equity: Promote equity in the service delivery and the quality of job outcomes for our consumers.

- **Objective 5.1:** Increase outreach to unserved and underserved populations of individuals with disabilities within the state as identified through the Triennial Statewide Comprehensive Needs Assessment.
- **Objective 5.2:** Ensure that all vocational rehabilitation services are available and the decision of the appropriateness of each service for a consumer is made without regard to race, gender, disability type, age or geographic location of the consumer.

- **Objective 5.3:** Continuously improve services to unserved and underserved populations of individuals with disabilities within the state as identified through the Triennial Statewide Comprehensive Needs Assessment.
- **Objective 5.4:** Continuously improve the methods and processes by which the employment-related needs of individuals with disabilities within the state are comprehensively assessed.

Measures for Goal 5: NC DVRS will equal or improve performance when compared to the baseline for the following measurable indicators:

Measures for Goal 5.1. RSA Standard and Indicator 1.5 (wage ratio) for identified unserved and underserved populations identified in the statewide comprehensive needs assessment. Federal Standard is 52.0		Federal Fiscal Year				Net Change FY 2013 - baseline FY
		2010	2011	2012	2013	
Gender	Male	48.65	47.02	46.72	45.82	-2.83
	Female	47.55	45.79	45.53	44.39	-3.16
Race or Ethnicity	White	50.21	48.64	48.27	47.01	-3.20
	Black or African American	44.84	43.96	43.75	43.17	-1.67
	American Indian or Alaskan Native	49.94	47.58	45.93	47.75	-2.19
	Asian	53.10	46.63	50.08	41.54	-11.56
	Native Hawaiian or other Pacific Islander	55.04	40.20	42.67	40.22	-14.82
	Hispanic or Latino	53.55	46.53	45.49	45.93	-7.62
Rural-Urban Commuting Area	Urban Area	48.08	46.32	46.30	45.59	-2.49
	Large-Town Rural Area	47.85	46.04	45.13	44.04	-3.81
	Small-Town Rural Area	47.44	46.79	45.25	44.39	-3.05
	Isolated Area	49.06	46.87	47.98	45.36	-3.70
Disability Type	Hearing or Vision	53.81	52.98	53.14	49.77	-4.04
	Mobility / Dexterity	55.21	53.26	53.56	51.26	-3.95
	Chronic Medical	53.43	49.52	50.37	50.20	-3.23
	Intellectual or Learning	42.53	42.00	41.28	40.83	-1.70
	Substance Abuse Disorder	47.21	46.15	45.37	45.50	-1.71
	Other Psychosocial or Mental/Emotional	46.78	44.99	44.46	43.80	-2.98
	Brain Injury	51.95	46.85	49.53	47.92	-4.03

Performance Assessment for RSA Standard and Indicator 1.5: *Wage ratio for identified unserved and underserved populations identified in the statewide comprehensive needs assessment. Federal Standard is 52.0*

As VR consumer wages do not increase at the same rate as the average hourly wage for all workers in North Carolina, performance on this indicator has declined overall. Some population groups, namely Asians and Pacific Islanders with disabilities, experienced a double-digit net decrease; however, these groups are small and lower average hourly earnings among a just a few individuals account for this notable difference. In FFY 2013, the ratio of average hourly earnings for VR consumers in competitive employment compared to that of North Carolina's statewide workforce remains higher for males than females and higher for Whites than for minorities. VR consumers with physical disabilities earn closer to the state average than those with intellectual disabilities or mental illness. There is little difference in earnings for VR consumers living in difference Rural-Urban Commuting Areas.

Measures for Goal 5.1. Percent of total applications for VR services by group.		Federal Fiscal Year				Net Change
		2010	2011	2012	2013	FY 2013 - baseline FY
Gender	Male	57.25%	55.74%	55.02%	55.67%	-1.58%
	Female	42.75%	44.26%	44.98%	44.33%	1.58%
Race or Ethnicity	White	49.60%	48.91%	48.83%	47.73%	-1.87%
	Black or African American	45.13%	46.60%	46.45%	46.70%	1.57%
	American Indian or Alaskan Native	1.83%	1.68%	1.85%	2.33%	0.50%
	Asian	0.46%	0.46%	0.45%	0.55%	0.09%
	Native Hawaiian or other Pacific Isl.	0.09%	0.11%	0.10%	0.11%	0.02%
	Hispanic or Latino	2.89%	2.24%	2.32%	2.58%	-0.31%
Rural-Urban Commuting Area	Urban Area	62.75%	63.63%	63.76%	62.98%	0.23%
	Large-Town Rural Area	22.19%	21.83%	21.49%	22.11%	-0.08%
	Small-Town Rural Area	7.47%	7.33%	7.73%	7.74%	0.27%
	Isolated Area	6.06%	5.79%	5.74%	5.92%	-0.14%
Disability Type	Hearing or Vision	3.46%	3.42%	3.44%	3.99%	0.53%
	Mobility / Dexterity	14.11%	13.96%	13.88%	13.41%	-0.70%
	Chronic Medical	7.74%	7.48%	7.69%	7.22%	-0.52%
	Intellectual or Learning	22.99%	21.85%	22.11%	22.16%	-0.83%
	Substance Abuse Disorder	6.83%	6.85%	6.72%	6.24%	-0.59%
	Other Psychosocial or Emotional	25.28%	26.82%	27.20%	27.37%	2.09%
	Brain Injury	1.22%	1.36%	1.21%	1.18%	-0.04%

Performance Assessment for 5.1. Percent of total applications for VR services by group.

The data in the above table shows a net decrease of 1.58% in applications from males with disabilities relative to females; although males still accounted for nearly 55.7% of the total applications for VR services in FFY 2013. In FFY 2010, Whites were no longer a majority group for VR applications, and there has since been a net decrease of 1.87% in applications from Whites, while proportionately there was a net increase in applications from all other minority groups except Hispanics. The percent of applications from different Rural-Urban Community Areas remained relatively constant from FFY 2010 to 2013; although more than 85% of VR applicants are from urban areas or large towns. Over the period of evaluation, there was a 2.1% net increase in applicants with psychosocial and emotional conditions, which accounted for about 27.4% of all applicants in FFY 2013. Note that disability type is missing for the 18.4% of applicants in FFY 2013 due to cases closed prior to eligibility determination.

Measures for Goal 5: Satisfaction Survey Results by Population Group	Federal Fiscal Year				Net Change
	2010	2011	2012	2013	FY 2013 - baseline FY
For population groups identified as unserved or underserved in the statewide comprehensive needs assessment: Percent indicating “above average” or “excellent” to the Consumer Satisfaction Survey: "How satisfied are you with your level of involvement in your rehabilitation program?"					
1 Resides in rural area	85.1%	82.6%	83.7%	87.5%	2.4%
2 Female	82.0%	80.8%	81.2%	80.9%	-1.1%
3 Minority race or ethnicity	82.2%	81.5%	82.6%	82.5%	0.3%
4 American Indian or Alaskan Native	87.5%	91.3%	73.3%	84.4%	-3.1%
5 Age 24 or under at application	77.1%	76.3%	79.3%	81.3%	4.2%
6 Age 55 or older at application	84.5%	84.1%	84.0%	81.3%	-3.3%
7 Primary impairment is cognitive / learning	79.8%	81.4%	83.2%	84.5%	4.7%
8 Primary impairment is psychosocial or emotional	74.9%	76.7%	78.8%	77.2%	2.3%
9 Primary impairment is sensory or communicative	86.4%	90.6%	82.4%	82.6%	-3.8%
10 Primary impairment is physical	82.4%	83.1%	83.1%	83.0%	0.6%
For population groups identified as unserved or underserved in the statewide comprehensive needs assessment: Percent indicating “above average” or “excellent” to the Consumer Satisfaction Survey: "Overall, how would you rate your experience with the North Carolina VR program?"					
1 Resides in rural area	70.9%	74.4%	71.3%	70.0%	-0.9%
2 Female	68.6%	67.4%	66.7%	67.0%	-1.7%
3 Minority race or ethnicity	68.9%	67.2%	69.1%	65.8%	-3.1%
4 American Indian or Alaskan Native	81.3%	73.9%	56.7%	61.3%	-20.0%
5 Age 24 or under at application	59.7%	58.2%	61.0%	57.0%	-2.7%
6 Age 55 or older at application	78.3%	73.3%	73.1%	75.8%	-2.5%
7 Primary impairment is cognitive / learning	64.3%	61.4%	67.0%	61.3%	-3.0%
8 Primary impairment is psychosocial or emotional	61.4%	63.3%	64.3%	60.3%	-1.1%
9 Primary impairment is sensory or communicative	76.8%	86.6%	74.1%	71.2%	-5.6%
10 Primary impairment is physical	71.2%	74.4%	70.4%	74.3%	3.1%

Performance Assessment for population groups identified as unserved or underserved in the statewide comprehensive needs assessment: Percent indicating "above average" or "excellent" to the Consumer Satisfaction Survey.

Regarding satisfaction with level of involvement in their VR program, there was a net decrease in satisfaction of between 3% and 4% among people of American Indian or Alaskan Native backgrounds; consumers ages 55 and older at application; and individuals whose primary impairment was a sensory or communicative disability. In contrast, a net increase in satisfaction of greater than 4% was observed among transition age youth and individuals whose primary impairment was a cognitive or learning disability.

Regarding overall satisfaction with the VR program, there was a net decrease of 20% among people of American Indian or Alaskan Native backgrounds; however, the number of individuals in this population were few enough in FFY 2013 (n = 8) that a single low score had a significant impact on the group rating. A net increase in satisfaction with the consumer's overall VR experience was observed only among VR consumers whose primary impediment to employment is a physical disability. NC DVRS will focus on improving consumer satisfaction during the next triennial cycle.

Supported Employment Goals and Strategies

Requirement:

2. Identify all supported employment program goals consistent with the goals described in Attachment 4.11(c)(4), including an evaluation of the extent to which the supported employment program goals were achieved.
 - Identify the strategies that contributed to the achievement of the goals.
 - Provide a description of the factors that impeded the achievement of the goals and priorities.

Response: Goals for the supported employment program for FFY 2013 included:

Supported Employment Goal 1: Increase the number of individuals with most significant disabilities who receive supported employment services.

Measures for SE Goal 1: Objective 1. Increase the number of individuals with most significant disabilities who receive supported employment services.		Federal Fiscal Year				Net Change FY 2013 - baseline FY
		2010	2011	2012	2013	
Measure SE.1.	Number of individuals receiving supported employment services.	4,385	4,372	4,305	3,979	-406
Measure SE.2.a.	Number of individuals exiting the VR program in employment in an integrated setting with supports.	923	968	1,023	989	66
Measure SE.2.b.	Of the individuals who receive supported employment services, the percent who exit the VR program with an employment outcome.	50.7%	49.0%	49.8%	43.3%	-7.4%

Performance Assessment for SE Goal 1: *Increase the number of individuals with most significant disabilities who receive supported employment services.*

The reported number of VR consumers receiving supported employment services through the Division decreased in FFY 2013 by 406 individuals from that of the baseline year. The observed decrease is partially attributed to the instability of several supported employment service providers during this period. During this economic downturn, several programs were unable to retain staff due to financial instability. In addition, the community rehabilitation program specialists indicate that this trend may also be attributed to their observation that today's employers are most interested in hiring workers who are able to multitask as compared with an individual dedicated toward one or two tasks. This limits placement opportunities for individuals receiving supported employment services. The longstanding shortage of funds dedicated to long term follow along for this population is another important factor.

Supported Employment Goal 2: Identify and begin implementing practices that can increase the successful closure rate of individuals receiving supported employment services.

Performance Assessment for SE Goal 2: *Identify and begin implementing practices that can increase the successful closure rate of individuals receiving supported employment services.*

During FFY 2013, 989 individuals who received supported employment services exited the VR program successfully employed in an integrated setting with supports, compared with 1,293 individuals receiving the services, but closing unsuccessfully without achieving their successful employment outcome. This success rate was 43.3%, which is a 7.4% decrease from the baseline year. The issues identified in the assessment of SE Goal 1, regarding the availability of supported employment services, also adversely impact the ability of service providers to achieve employment outcomes for VR consumers. To adapt to the changing and challenging economy, the Division has since implemented an outcome-based milestone payment system for community rehabilitation programs that were previously billing at an hourly rate for supported employment job development and intensive training services. This change impacted services

on a systems level to the benefit of VR consumers in that the payment to the CRP is contingent on the consumers' success. The Division expects services will become more efficient and simultaneously result in increased outcomes for VR consumers.

Supported Employment Goal 3: *In search of improved supported employment services delivery models and practices, continue assessing the positive components gained through experience with the ARRA-funded innovative collaborative projects that concluded with FFY 2011.*

Performance Assessment: During FFY 2012, the Division worked to establish two programs as an extension of programs that were funded under the ARRA contracts that the Division had established during FFY 2010-11 to help meet the needs of consumers with significant and most significant disabilities in areas of employment training, employment-related transportation, and the creation of CRP-based enterprises for purposes of training. Two of the programs that were extended follow the "Project Search," a nationally known model, to provide training for transition-aged students in the Durham and Charlotte areas. These programs are described as business-led one-year school-to-work programs provided entirely at a workplace. The host sites for the expanded program, where were selected through a collaborative planning process, include Durham Regional Hospital in Durham, NC and Mercy Hospital in Charlotte, NC. These programs are based on a concept that employs total workplace immersion which facilitates a seamless combination of classroom instruction, career exploration, and hands-on training through worksite rotations. The two programs entered performance-based contracts July 1, 2012 and remain in place.

Supported Employment Goal 4: *Support increased training/qualification requirements for job coaches and their supervisory staff. Collaboratively increase supported employment training to NC DVRS rehabilitation counselors and Community Rehabilitation Program direct service staff through the addition of a web-based (and other forms of) curriculum development.*

Performance Assessment: The CRP-DVRS steering committee has established a subcommittee to focus on this area and are assessing the current training needs of CRP staff. The committee will continue to work with the regional TACE to implement components of the training effort addressing this area as resources allow. The Division's rules addressing these requirements are also in process.

Supported Employment Goal 5: *Continue collaboration with the Division of Mental Health/Developmental Disabilities/Substance Abuse Services to secure reporting of the expenditures of the Long Term Support service definition in order to assure consistent administration of these funds.*

Performance Assessment: The Division of Mental Health, Developmental Disabilities, and Substance Abuse Services' (DMHDDSA) employment specialist has been instrumental in bridging a communication gap that existed in previous years. This individual has been very involved improving Local Management Entity/Managed Care Organization (LME/MCO) funding agreements to provide emphasis on effective utilization and accounting of extended services funding for recipients of supported employment services. The individual is also providing regular education to the service provider community. DMHDDSA is developing a state definition for supported employment and long term vocational support. Through this definition, if an individual with disabilities chooses NCDVRS as their supported employment provider, and the person is served through the (LME/MCO) system, they will be able to receive long term vocational supports (LTVS).

Requirement:

3. Provide an Assessment of the performance of the VR program on the standards and indicators for FY 2012

Division's Response:

During FFY 2013, NC DVRS met three of the standard 1 performance indicators and the performance standard 2.1. The Division did not meet RSA performance standard indicators 1.1., 1.2., and 1.5.

RSA Performance Standards and Indicators	Federal Fiscal Year			
	2010	2011	2012	2013
1.1. The number of persons achieving employment outcomes will equal or exceed the previous year.	5,961	6,303	6,758	6,723
1.2. The percentage of all individuals who have achieved an employment outcome after exiting the program having received services will equal or exceed 55.8%.	56.6%	56.5%	56.4%	50.4%
1.3. The percentage of individuals rehabilitated who achieve competitive employment earning at least minimum wage will equal or exceed 72.6%	100%	100%	100%	100%
1.4. Of all individuals who exit the VR program in competitive, self-, or Business Enterprise Program employment with earnings equivalent to at least the minimum wage, the percent who are individuals with significant disabilities will equal or exceed 62.4.	77.2%	77.1%	79.2%	79.7%
1.5. The average hourly earnings of all individuals who exit the program in competitive employment as a ratio to the average hourly earnings for all employed North Carolinians will equal or exceed 0.52.	0.50	0.48	0.48	0.47
1.6. Of the individuals who achieve competitive employment, the difference between the percent who reported their own income as the largest single source of economic support at closure compared to the percent at application. The difference must equal or exceed 53.	62.3	63.8	63.8	62.8
2.1. Of the individuals who achieve competitive employment, the difference between the percent who reported their own income as the largest single source of economic support at closure compared to the percent at application. The difference must equal or exceed 53.0.	0.97	0.99	0.95	0.96

Performance Assessment 1.1. *The number of persons achieving employment outcomes will equal or exceed the previous year.*

During FFY 2013, the number of individuals exiting the Division's VR program in employment decreased by 35 (<1%) from the previous year, although there was net gain of 762 since FFY 2010, the baseline year. The sustainability of markedly increased employment outcomes from that of the baseline year is largely due to successful partnerships with community rehabilitation programs, and an emphasis on vocational counseling and guidance, benefits counseling, rehabilitation services, and an emphasis on matching employers' workforce needs with the skillsets of VR consumers through a Dual Customer Approach. Placements through community rehabilitation programs accounted for 1,987 (30%) of the total 6,723 placements that resulted in employment outcomes for VR consumers in FFY 2013. Other strategies employed to improve performance on this indicator are summarized in attachment 4.11(d). The Division continues to utilize on-the-job training and internship services, though wage subsidies are funded at a reduced amount relative to when additional funding for these services was available through the American Recovery and Reinvestment Act.

Performance Assessment 1.2. *The percentage of all individuals who have achieved an employment outcome after exiting the program having received services will equal or exceed 55.8%.*

The Division's VR Program did not meet this indicator in FFY 2013. This is partially due to a higher than expected number of counselor vacancies. With many of the vacant positions now being filled, continued

monitoring of this indicator and increased emphasis of its importance by management, in addition to group orientation at the larger offices, which should better inform VR clients on the program's expectations of employment prior to provision of planned services, the Division expects to improve its performance on this measure for FFY 2014.

Performance Assessment 1.3. *The percentage of individuals rehabilitated who achieve competitive employment earning at least minimum wage will equal or exceed 72.6%*

The Division consistently achieves 100% on this indicator because it does not consider paid employment at subminimum wage a successful employment outcome.

Performance Assessment 1.4. *Of all individuals who exit the VR program in competitive, self-, or Business Enterprise Program employment with earnings equivalent to at least the minimum wage, the percent who are individuals with significant disabilities will equal or exceed 62.4.*

The Division continues to substantially exceed the RSA standard in this category through its emphasis on serving individuals with significant and most significant disabilities in collaboration with community rehabilitation programs, advocacy groups, and multiple referral sources.

Performance Assessment 1.5. *The average hourly earnings of all individuals who exit the program in competitive employment as a ratio to the average hourly earnings for all employed North Carolinians will equal or exceed 0.52.*

For federal fiscal year 2013, the Division was not able to meet this RSA indicator, which continues to present a challenge to the Division, despite strategies to encourage additional education and training to increase client earnings. The Division attributes its current performance on this indicator primarily as a result of two main factors: the large number of transition-age youth whose exit the VR program in entry-level positions and the number of individuals served through supported employment, which comprise 15% of the programs employment outcomes. These individuals exit the VR program with earnings that are closer to minimum wage. Despite the impact on the Division's performance on this measure, the Division maintains a strong commitment to supported employment and providing VR services for transition-age youth. This past year, the Division participated in a learning collaborative sponsored by the Institute for Community Inclusion at the University of Massachusetts, Boston, to study strategies for increasing consumer wages, including a team-based approach with a focus on employer relations and job matching. The pilot study included the Asheville and Forest City offices, which represent different types of local economies. During the period of the study, average hourly earnings for clients at the pilot offices had increased while wages had decreased for clients served at other offices throughout the state.

Performance Assessment 1.6. *Of the individuals who achieve competitive employment, the difference between the percent who reported their own income as the largest single source of economic support at closure compared to the percent at application. The difference must equal or exceed 53.*

During FFY 2013, the Division exceeded the performance standard for this indicator, and expects continued performance in FFY 2014.

Performance Assessment 2.1. *Of the individuals who achieve competitive employment, the difference between the percent who reported their own income as the largest single source of economic support at closure compared to the percent at application. The difference must equal or exceed 53.0.*

NC DVRS continues to perform well on this indicator and expects to continue strong performance indefinitely, facilitated by outreach, a diversified service base, and continued efforts to collaborate with organizations representing diverse populations. Cultural awareness training efforts as part of the revised goals will also help maintain the Division's strong performance on this indicator going forward.

Requirement:

4. Provide a report on how the funds reserved for innovation and expansion (I&E) activities were utilized in FY 2013.

Division's Response:

During FFY 2013 NC DVRS reserved and used a portion of Title I funds to move forward with the strategies identified to achieve goals and priorities identified in Attachment 4.11(c)(1). The areas where funds were utilized include:

- Specialized Supported Employment Demonstration Project: In collaboration with NC Easterseals/UCP, a demonstration program that targets the provision of extensive wrap around support services for dually-diagnosed individuals with mental and mobility impairments that have not been successful with traditional supported employment programs was funded. During SFY 2013, the demonstration program reported that 14 individuals were successfully placed, reached stabilization or achieved a successful employment outcome.
- Support of Activities of the State Rehabilitation Council

During FFY 2012, the Division worked to establish two programs as an extension of programs that were funded under the ARRA contracts that the Division had established during FFY 2010-2011 to help meet the needs of consumers with significant and most significant disabilities in areas of employment training, employment-related transportation, and the creation of CRP-based enterprises for purposes of training. Two of the programs that were extended follow the "Project Search" nationally known model to provide training for transition-aged students in the Durham and Charlotte areas. These programs are described as business-led, one year school-to-work programs that are embedded within an actual workplace. The host sites for the expanded program selected through a collaborative planning process were Durham Regional Hospital in Durham, NC and Mercy Hospital in Charlotte, NC. The differentiation component of these programs is that it follows a concept that employs total workplace immersion which facilitates a seamless combination of classroom instruction, career exploration, and hands-on training through worksite rotations. The two programs entered performance-based contracts July 1, 2012 and remained in place during FFY 2013. There are initial plans in place to expand this model to four additional locations distributed across the state during FFY 2015, should adequate funding remain available.

Attachment 6.3 Quality, Scope, and Extent of Supported Employment Services

- Describe quality, scope, and extent of supported employment services to be provided to individuals with the most significant disabilities
- Describe the timing of the transition to extended services

Division's Response:

The North Carolina Division of Vocational Rehabilitation Services in cooperation with the Division of Mental Health, Developmental Disabilities, and Substance Abuse Services, provided grant funding in 1985 to 6 service providers in North Carolina to implement supported employment services. In 1986 the Division was awarded funding from the Office of Special Education and Rehabilitation Services to create a systems change approach to implementing supported employment services in North Carolina. Since 1987 the Division's effort has grown to a statewide system of approximately 118 supported employment programs. During FFY 2013, nearly 4,000 individuals received supported employment services and 986 of these individuals achieved a successful employment outcome. Supported employment providers receive vendorship funding through the utilization of Title VI, Part B funds and General services fund (110). Title VI, Part B funds will continue to be utilized to supplement funds under Part B of Title I for the cost of supported employment services to persons with the most significant disabilities. However, the extent of services offered to a particular individual is determined on an individual basis incorporating the individual's informed choice pertaining to their need to achieve and to maintain a vocational goal. Examples of populations that will be served include (but are not limited to) individuals with severe and persistent mental illness, significant cognitive impairments, cerebral palsy, autism, and traumatic head injury. Supported employment services will be provided on a time-limited basis to individuals with the most significant disabilities. These services may include, but are not limited to, the following:

- development of and placement in jobs based on client informed choice in an integrated setting for the maximum number of hours possible based on the unique strengths, resources, interests, concerns, abilities, and capabilities of individuals with the most significant disabilities;
- intensive on-site job skills training and other training provided by skilled job trainers, co-workers, and other qualified individuals, including fading and stabilization;
- extended follow along services, including regular contact with employers, trainees, parents, guardians, or other suitable professional and informed advisors, in order to reinforce and stabilize the job placement; and
- discrete post-employment services may be funded under Title I of the Act following the individual's transition to extended services if the required services are unavailable from the extended service providers and if they are necessary to maintain the job placement.

In addition to the individual and group models of supported employment, the transitional employment model will continue to be funded on a demonstration basis. These programs will provide transitional employment services to persons with severe and persistent mental illness and will serve as model sites for future transitional employment programs. Under federal regulations, the time-limited vocational rehabilitation supported employment services to be provided are not to exceed 18 months funding unless the individualized plan for employment indicates that more than 18 months of services is necessary in order for the individual to achieve job stability prior to transition to extended services. The transition process from vocational rehabilitation services to the extended service phase begins during the stabilization phase of supported employment. During this phase, the counselor documents the individual's adjustment to the job environment and job duties. Some indicators of stabilization include, but are not limited to, employer satisfaction, client satisfaction and minimal job coach intervention. The extended services phase continues during the 90 days after the end of the stabilization phase. Interagency involvement begins from the point of referral for vocational rehabilitation services provided by the Division and continues until the stabilization phase is completed and the long-term support provider begins providing extended services.